



## APPLICATION FOR CONDOMINIUM CONVERSION

THIS FORM IS TO BE COMPLETED IN FULL, WHEREVER APPLICABLE, BY THE REGISTERED OWNER OF THE LAND THAT IS THE SUBJECT OF THE APPLICATION OR BY A PERSON AUTHORIZED TO ACT ON THE REGISTERED OWNER'S BEHALF

Name of registered land owner: \_\_\_\_\_

Owner's address and phone: \_\_\_\_\_

Name of agent (authorized to act on behalf of owner), if any: \_\_\_\_\_

Agent's address and phone: \_\_\_\_\_

### LEGAL DESCRIPTION

All/part of the \_\_\_\_\_ ¼ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ West of \_\_\_\_\_ Meridian

Being all/part of Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_

Certificate of Title Number: \_\_\_\_\_

Municipal Address: \_\_\_\_\_

### LAND USE

Existing use of the land: \_\_\_\_\_

Proposed number of units: \_\_\_\_\_

Number of parking stalls on site: \_\_\_\_\_

Designated use of the land, as classified under the Edmonton Zoning Bylaw No. 20001: \_\_\_\_\_

### REGISTERED OWNER OR AGENT

I \_\_\_\_\_ hereby certify that

☐ I am the registered owner, or

☐ I am the agent authorized to act on behalf of the registered owner

*and that the information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts relating to this application for condominium conversion.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_