



Village of Ashcroft
 601 Bancroft Street, PO Box 129, Ashcroft, BC V0K 1A0
 Phone: 250-453-9161 Fax: 250-453-9664 Email:
 admin@ashcroftbc.ca

SUBDIVISION APPLICATION

Date: _____

File No.: _____

Legal Description of Land to be Subdivided: _____

Parcel Identifier(s): _____

Civic Address of Subject Property to be Subdivided: _____

Registered Owner(s): _____

Mailing Address: _____

Telephone No.: _____

Email: _____

Applicant's Name: Same as owner _____

Or:

Applicant's Name: _____

Mailing Address: _____

Telephone No.: _____

Email: _____

 Owner/Applicant Signature

 Owner/Applicant Signature

Are you aware of any contaminated soils on the property from industrial or commercial activities?

Please initial: No _____ Yes _____ Further details will have to be submitted

Does your property contain waterways that fall under the Riparian Area Regulations?

Please initial: No _____

Yes _____ The services of a Qualified Environment Professional will be required