



Town of Flatrock

Development Application

663 Wind Gap Road
Flatrock, NL A1K 1C7
(709)437-6312 (p)
(709)437-6311 (f)
info@townofflatrock.com

Civic Information

Civic Number _____

Street Name _____

Contact Information

Name _____

Mailing Address _____

Phone _____ Cell _____

Email _____

Building Information

Intended Use (Residential/Commercial) _____

Development Type(New/Extension/Subdivide) _____

Proposed Size: Length(ft) _____ Width(ft) _____ Height(ft) _____

Total Square Footage _____ Estimated Cost (\$) _____

Total number of Washrooms _____ Will development have an apartment? Yes No

Land Description

Frontage _____ Depth _____ Land Area Total (Ft²) _____

Existing Land Use (Residential/Commercial/Crown/Vacant) _____

Subdivision of Land Y / N Number of Lots _____ Total Area of Subdivision (Ft²) _____

Road Construction (New Road/Extension of Existing) _____

Proposed Means of Access (Existing/New Culvert/New Access) _____

Signature of Agreement

I confirm that the information supplied is to the best of my knowledge correct. I agree to comply with the Town of Flatrock's Municipal regulations, the national building code, and agree to develop in accordance with the plans approved by the municipality and not to commence development without written approval from the Town.

Signature _____ Date _____

Regulations

- A Permit to Develop is valid for a period of 1 year and may be extended twice up to a total maximum period of 3 years. Permit to build will be issued at \$0.30/Ft², once approved.
- Legal land survey with description of the property, plot plan of development, and house plans **MUST** accompany application.
- No land subdivided unless a permit for the development of the subdivision is first obtained from the Town.
- Building lot fronts paved section of the road.
- 24 in diameter culvert installed.
- Set back of residence between 65-100Ft from road, 16.4Ft from side and rear boundaries.
- Government Services septic system approval, and a copy of septic system design.
- A Occupancy deposit of \$500 is required, \$400 will be refunded within 5 business days once criteria has been met.

Office Use

Notes: _____

Date Issued _____ Permit Number _____

This Application must be submitted no later than 4:00 pm the Thursday prior to the Council Meeting. For Meeting dates, please contact the office, or visit www.townofflatrock.com.