

REQUEST FOR ACCESS

COUNTY OF FORTY MILE NO. 8

The access request on this application will be investigated and evaluated prior to the commencement of any installation.

In order for your request to be properly investigated and considered, the following details and location sketch are required.

LAND LOCATION: _____ ¼ Sec. _____ Twp. _____ Rge. _____ West of _____ Meridian Lot _____ Block _____ Plan _____
NAME OF LANDOWNER: _____
POSTAL ADDRESS: _____
TELEPHONE NO. _____ POSTAL CODE: _____

Access: Initial _____ Additional _____ Relocate _____
Access required for: Residential _____ Field _____
How have you been getting to this land? _____ _____
What is the condition of present access? _____ _____
Why is the additional/relocate access required? _____ _____
If the access is required for residential use, please complete the following: Do you presently reside on the land? Yes _____ No _____ If not, where do you presently reside? _____ Anticipated date you will reside on the land _____

NOTE: The location sketch must be completed. Please indicate low areas (i.e. sloughs, muskeg) drainage courses, cultivated and treed areas.

Should space provided be insufficient when answering any of the above questions, please attach a list of additional information.

Signature of Applicant

Approved By

Address

Date

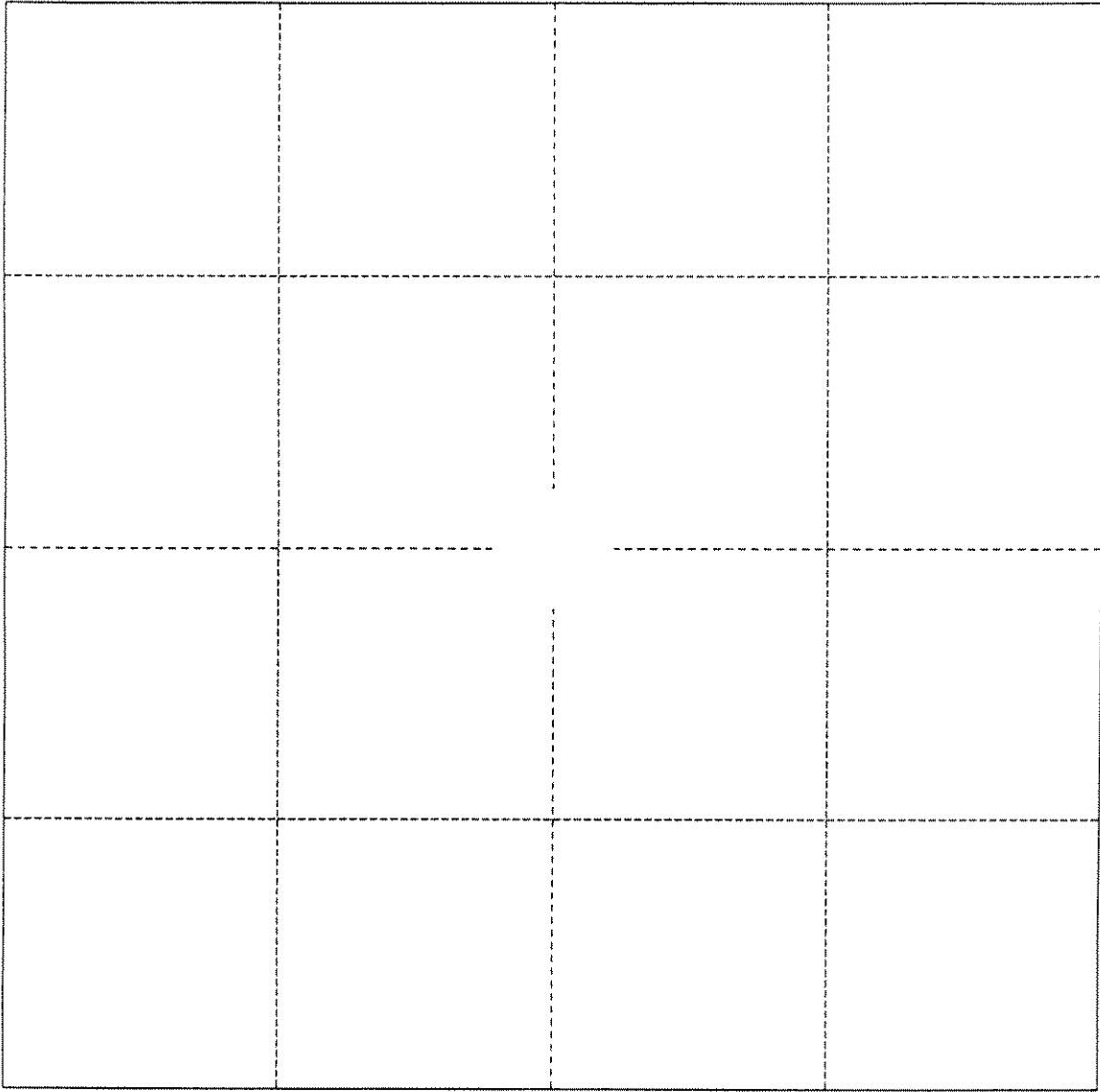
Telephone No.

Copy distribution: Original White Copy to Public Works Dept; Blue Copy to Applicant; Yellow Copy to County Office

RANGE _____ W. OF _____ MERIDIAN



TOWNSHIP _____



FOR OFFICIAL USE ONLY:

31	32	33	34	35	36
30	29	28	27	26	25
19	20	21	22	23	24
18	17	16	15	14	13
7	8	9	10	11	12
6	5	4	3	2	1