

Infrastructure, Planning & Development Department

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ENCROACHMENT AGREEMENT REQUEST FORM

Date:	Your File No:			
Applicant Name:				
Additional Names: (if applicable)				
Mailing Address:				
City:	Province		Postal Code:	
When you apply, personal information may I Municipal Government Act and/of Section 6: available to the public. If you have any quest	3 of the Safety Codes Act. The infor	mation will be used to process your ap		vacy Act, Section 652 of the dress may be included on the reports that are
WHERE IS YOUR ENCE	ROACHMENT LOC	ATED?		
MUNICIPAL ADDRESS:				
LEGAL DESCRIPTION:	PLAN:		BLOCK:	LOT:
SUBMISSION DOCUMEN One (1) origin		d Surveyor's Real Prope	rty Report (faxed, emai	iled or spliced copies will not be
accepted accepted)				
A copy of title				
ENCROACHMENT TYPES	S AND FEES			
→ Application f	fee for encroachmen	ts is \$250		
Method of Payment (d	check one)			
Cash:	Cheque:	Visa/MC:	Debit:	:
Reciept No: _				
Signature of Applica				Date (YYYY/MM/DD)