

# Impact to Municipal Infrastructure

Property Information
Municipal Address:

Applicant Information
Name:
Company Name:
Mailing Address:
Phone:
Email:

Registered Landowner (if not the applicant)
Name:
Company Name:
Mailing Address:
Phone:
Email:

Are you the Registered Owner of the Property?	<input type="checkbox"/> YES <input type="checkbox"/> NO   - If NO, please obtain Owner Authorization (below)
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Declaration of Agent's Authorization
As the Applicant indicated on this application, I declare that the owner/owners of the proposed development site described on this application have granted consent to me, to serve as their authorized agent to complete this Development Permit application on their behalf.
I further declare that:
<ul style="list-style-type: none"> <li>▪ The owner/owners are aware of the request being made on their behalf, and that all information provided in this application is truthful, complete, and accurate for the submission being made.</li> <li>▪ The owner/owners grant authorization for City staff to enter onto the proposed development site when necessary to evaluate the site in relationship to this application being made.</li> <li>▪ The owner/owners will cooperate with the City to provide all necessary information reasonably required and/or requested by staff to allow for the proper review of this Development Permit application.</li> </ul>
<input type="checkbox"/> I HAVE READ, UNDERSTOOD and AGREE TO THE "DECLARATION OF AGENT'S AUTHORIZATION"

**PROJECT DETAILS – DRIVEWAY PERMIT (IMPACT TO MUNICIPAL INFRASTRUCTURE)**

All applications must comply with the City of Medicine Hat’s **Land Use Bylaw No.4168**

	Required Item	Format Requirements
<input type="checkbox"/>	<p><b>1. SITE PLAN</b>                      (Please see example on page 4)  <i>(A 1:200 metric scale is recommended)</i></p>	<p>The site plan must include the following:</p> <ul style="list-style-type: none"> <li>▪ All property lines shown and labelled</li> <li>▪ Locations of all existing structures and/or driveways on the site</li> <li>▪ Identify dimensions of any existing driveways and clearly identify the location and dimensions of the proposed driveway</li> <li>▪ Identify if the curb is straight faced or rolled. If the curb is straight, indicate the length of curb cut required</li> <li>▪ Identify any municipal infrastructure that may be impacted as a result of the driveway development (e.g. boulevard trees, power poles, etc.)</li> <li>▪ Identify location of all utilities (electric (including overhead), gas, water, sanitary sewer) as well as any swales located on the property</li> </ul>
<input type="checkbox"/>	<p><b>2. AUTHORIZATION OF WORK WITHIN DEVELOPMENT AREA AGREEMENT</b>                      (Drafted by Planning &amp; Development Services)</p>	<p>The following items are required to proceed with fully executing the Agreement:</p> <ul style="list-style-type: none"> <li>▪ The developer must return all (2) original Agreements, signed, and witnessed to Planning and Development Services.</li> <li>▪ Contractor Insurance is required that has a single limit liability for bodily injury, personal injury, and property damage not less than \$1,000,000, and general aggregate liability not less than \$2,000,000, and the City shall be named as an additional insured as per the Agreement. Documentation of this must be provided to Planning and Development Services.</li> <li>▪ A security deposit will be required, which will be returned once a final inspection is completed confirming the work is in accordance with city standards. You will be notified of the required amount as the security is determined by the extent of work being done.</li> </ul>

<input type="checkbox"/>	<p><b>APPLICATION FEE (2023)</b></p> <ul style="list-style-type: none"> <li>▪ <b>Authorization to Work in Development Area Agreement - \$220.50</b> (includes GST)</li> </ul>	<ul style="list-style-type: none"> <li>▪ The City of Medicine Hat will email a fee slip or mail an invoice to the applicant for the Development Permit fee once the application has been received. If a variance is required as part of the Development Permit conditions, this is to be paid prior to issuance of the Development Permit.</li> <li>▪ Fee payment may be made by Visa, Mastercard, Debit, Cash, or Cheque.</li> </ul>
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**Declarations**

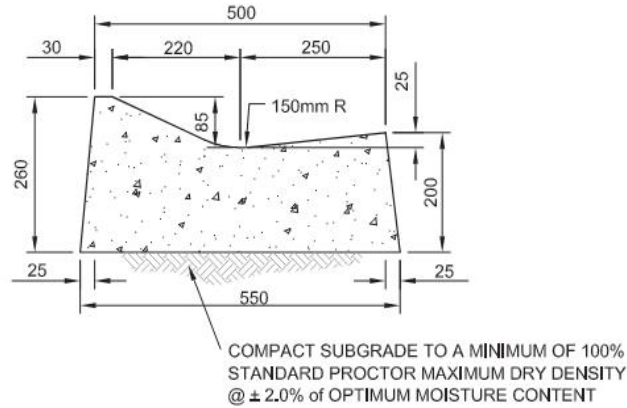
- I/WE hereby make application for a Driveway Permit (DP) under the provisions of the City of Medicine Hat’s Municipal Servicing Standards and Municipal Works Construction Specifications in accordance with the plan’s specifications, information and materials submitted herewith and which form part of this application.
- The personal information on this form is being collected for the purpose of a Development Permit Application under the authority of the Freedom of Information and Protection of Privacy (FOIP) Act and is protected by the Act. If you have any questions about the information being collected, contact the City of Medicine Hat FOIP Head at 403.529.8234.
- I am aware that this proposal will be reviewed by Planning and Development Services and may be delayed or refused if the application and/or information/documents I provide are incomplete.
- I understand that additional information may be required after the Driveway Permit application has been submitted, and that the processing of my application will not proceed until I have provided all necessary information.
- I understand that all of my submitted materials must be clear, legible and precise, otherwise the review process of my application will be delayed. I understand that rough sketches are not acceptable and will also delay my application, and that plans and drawings should be prepared according to professional drafting standards.
- I understand that if the proposed development is located in an area where development constraints exist, (e.g., edge of coulee, flood plain, etc.) additional information and/or reports may be required.
- I understand that this permit application may be refused if the proposed development does not conform to the City of Medicine Hat’s Municipal Servicing Standards and/or Municipal Works Construction Specifications.
- I understand that all utility locates are required prior to construction. Locates can be requested online using the following website: <https://utilitysafety.ca/submit-a-locate-request>.
- I understand that compliance with the City of Medicine Hat’s Boulevard Development and Maintenance Policy No.0133 is required.
- I understand that compliance with the City of Medicine Hat’s Tree Preservation Bylaw No. 4218 is required.
- I understand that if work is to be performed on the same side of the RROW where streetlights are present, the streetlights are required to be deenergized.
- I understand that a Traffic Accommodation may be required if the proposed development is impacting the Road Right of Way. A Temporary Traffic Control (TTC) should be submitted for review and approval by the Municipal Works Department. Contact Municipal Works at 403.529.8177 or [mw@medicinehat.ca](mailto:mw@medicinehat.ca) for TTC submission and approval.
- I understand that an Authorization of Work Within Development Area Agreement with the City of Medicine Hat is required as City of Medicine Hat infrastructure will be altered.

**I HAVE READ, UNDERSTOOD and AGREE TO THE DEVELOPMENT PERMIT DECLARATIONS**

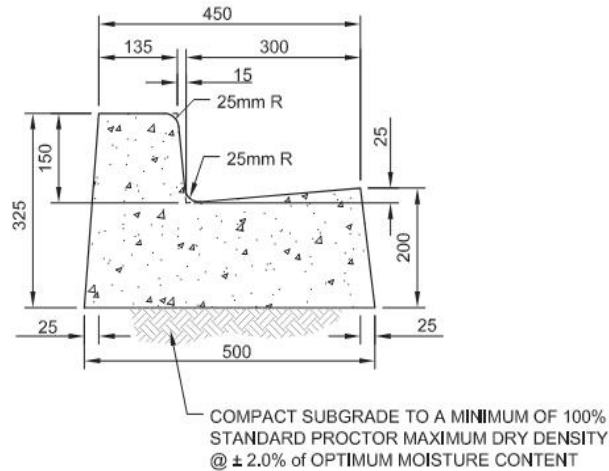
<b>Name (Print):</b>	<b>Signature:</b>	<b>Date:</b>



**City of Medicine Hat Municipal Works Construction Specifications  
Curb & Gutter Sections (MW 301 Specifications)**




**ROLLED CURB & 250mm GUTTER**



**150mm STANDARD CURB & 300mm GUTTER**

**NOTES:**

1. CEMENT TO BE TYPE 50, 25 MPa, 5%-8% AIR CONTENT
2. ALL DIMENSIONS ARE IN MILLIMETRES.

		DATE: 01/09/06		CURB & GUTTER SECTIONS		
		SCALE: NTS				
		DRAWN: C.B.		DWG. No. MW 301 Rev. 0		
0	09	03	18			FOR APPROVAL
No.	YY	MM	DD	REVISION DESCRIPTION	BY	APPROVED: