



# Pre-Application Review Meeting Form

Development Services – Planning Division  
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Mission, BC V2V 4L9  
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### For Office Use Only

File Number: \_\_\_\_\_  
 Fees: \$ 334.95 \_\_\_\_\_  
 Receipt #: \_\_\_\_\_  
 Received by: \_\_\_\_\_  
 Date Received: \_\_\_\_\_  
 Meeting Date: \_\_\_\_\_

**Proposal Type (check all that apply):**

ALR Application  
 Development Permit (DP)  
 Development Variance Permit (DVP)  
 OCP Amendment  
 Rezoning  
 Subdivision  
 Temporary Use Permit (TUP)  
 Text Amendment  
 Other \_\_\_\_\_

### Applicant / Proponent Information

Business Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Property Information

Property Identification Number: \_\_\_\_\_  
 Property Address: \_\_\_\_\_  
 Legal Description: \_\_\_\_\_

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### Development Proposal – Please provide a project overview

\_\_\_\_\_  
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 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name

Signature

Date