## **TOWN OF STRATFORD**

234 Shakespeare Drive Stratford, PE C1B 2V8

Date\_\_\_\_



**Planning Department** Phone: (902) 569-6255 Fax: (902) 569-1845

	PPLICATION FOR:			FEES
]	Bed and Breakfast Agreeme	ent		\$ 300.00
	Secondary Suite Agreement	i .		\$ 300.00
	Cottage Agreement			\$ 300.00
	Development Agreement			\$ 300.00
	Variance (including more that	nan one variance for the	same application)	
	• Minor (10% or less) + No			\$ 200.00 \$ 300.00
	• Major (greater than 10%) Official Plan Amendment +			\$ 300.00 \$ 1,000.00
			ne amendment for the s	ŕ
	application) + Notification F	g Bylaw Amendment (including more than one amendment for the same ration) + Notification Fees		\$ 300.00
	Special Permit Use + Notific	cation Fees		
ho 'a	plication will not be accept processing of an application yments may be made by ca EASE PRINT OR TYPE	on. The above fees may	vary as per the Town	of Stratford Fee Bylaw #3
	PID Number, Lot Number,	and Civic Address subj	ect property:	
	Name and mailing address	of landowner		
	Email address:	Т	elenhone:	
	Email address:  Name and mailing address		elephone:	
	Email address:  Name and mailing address  (If the applicant and landov support of this application.)	of applicant: cl	heck here if same:	ired from the landowner ir
	Name and mailing address (If the applicant and landov support of this application.)	of applicant: cl	heck here if same: er of permission is requ	
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	Name and mailing address (If the applicant and landov support of this application.)  Email address:  If applying for a variance, property of this applying for a variance, property and side Yard	of applicant: cl	heck here if same: er of permission is requ  Celephone:  owing:	