



CORPORATION OF THE CITY OF VERNON
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 www.vernon.ca

APPLICATION FOR STRATA CONVERSION

DATE OF APPLICATION		CITY'S FILE NUMBER	
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APPLICANT INFORMATION			
APPLICANT	NAME:		PHONE:
	ADDRESS:		FAX:
	POSTAL CODE:	E-MAIL:	CELL:
REGISTERED OWNER	NAME:		PHONE:
	ADDRESS:		FAX:
	POSTAL CODE:	E-MAIL:	CELL:

PROPERTY INFORMATION	
CURRENT CIVIC ADDRESS	
LEGAL DESCRIPTION	
Current Zoning	

DESCRIPTION OF PROPOSED PROJECT	

ENSURE ALL THE FOLLOWING ARE INCLUDED (AS APPLICABLE)

APPLICATION CHECKLIST	
* PLEASE NOTE - CITY COUNCIL IS THE APPROVING AUTHORITY FOR ALL STRATA CONVERSIONS. COUNCIL HAS SET POLICY ON THE CONDITIONS THAT STRATA CONVERSION ARE CONSIDERED. PLEASE CONTACT THE CITY'S CORPORATE OFFICE, OR GO ON THE CITY'S WEBSITE AT WWW.VERNON.CA TO RECEIVE A COPY OF THE POLICY.	
STRATA PLAN PREPARED BY A BCLS SHOWING ALL STRATA UNITS, DIMENSIONS AND ADDRESSES	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
COPY OF THE ENGINEER OR ARCHITECTS'S REPORT CLARIFYING SUBSTANTIAL COMPLIANCE WITH CITY BYLAWS AND THE BC BUILDING CODE	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
SCHEDULE "3" (APPOINTMENT OF AN AGENT)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
\$500.00 APPLICATION FEE	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Applicant Name: _____ Applicant's Signature: _____
 (Please Print Clearly)

Comments	For Office Use
	DATE RECEIVED:
	RECEIVED BY:
	ROLL NO:
	PROSPERO NO.: