



**TOWNSHIP OF CENTRE WELLINGTON APPLICATION  
FOR REVIEW OF DRAFT PLAN OF SUBDIVISION  
SUBDIVISION AGREEMENT**

**APPLICATION NUMBER:** \_\_\_\_\_ **DATE RECEIVED:** \_\_\_\_\_

<b>1. PROPERTY INFORMATION</b>	
Municipal Address:	
Legal Description:	
Cty File Number :	

<b>2. REGISTERED OWNER(S) INFORMATION</b>			
Name(s):			
Mailing Address:			
City:		Postal Code:	
Home Phone:		Work Phone:	
Fax:		Email:	

<b>3. AUTHORIZED AGENT(S) – If Any</b>			
Company Name:			
Name:			
Mailing Address:			
City		Postal Code:	
Work Phone:		Mobile Phone:	
Fax:		Email:	

The undersigned agrees to provide the Township with the **engineering** submission package electronically to [development@centrewellington.ca](mailto:development@centrewellington.ca). Further, the applicable fee of \$41,050.00 shall be **submitted** with this application.

_____	_____	_____
Name of Owner	Signature of Owner	Date

_____	_____	_____
Name of Agent	Signature of Agent	Date