5 St. Anne Street
St. Albert, AB
T8N 3Z9
Phone: (780) 459-1642
Fax: (780) 458-1974

DEVELOPMENT PERMIT APPLICATION CHECKLIST
CANNABIS RETAIL STORE

REQUIRED INFORMATION		Submitted (Completed by Applicant)	Office Use Only
1.	Completed Application Form	☐	☐
2.	Application Fee - payment	☐	☐
3.	Site Plan in Accordance with the requirements below	☐	☐
4.	Floor Plans in Accordance with the requirements below	☐	☐
5.	Owner's Authorization – Completed form or letter	☐	☐
6.	Letter of intent – business description, hours of operation, number of staff	☐	☐

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PLAN REQUIREMENTS (2 Copies):			
Site Plan			
1.	Scale of plan *(in metric)*	☐	☐
2.	North arrow	☐	☐
3.	Municipal address and legal description of property	☐	☐
4.	Outline of all buildings and/or structures on the site	☐	☐
5.	Outline of specific unit to be occupied	☐	☐
6.	Layout of interior – doors, windows, dimensions, and room labels	☐	☐
7.	Layout of existing and proposed parking areas	☐	☐

ADDITIONAL PLANS AND INFORMATION *In accordance with Land Use Bylaw Section 3.3(4) the Development Officer may require additional information and plans*		
1.	Copy of AGLC application (if available)	
2.	Any other information required by the Development Officer to determine how the proposed development may affect land uses in the vicinity	