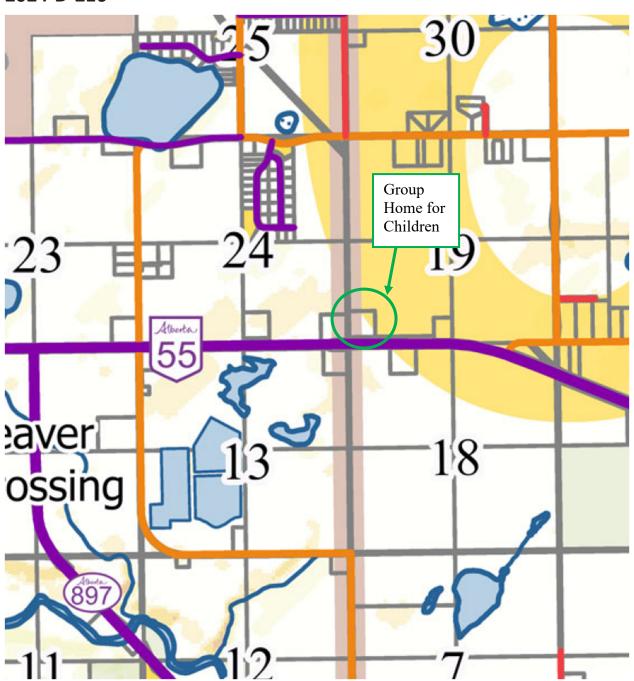
APPENDIX B



2024-D-216





md.bonnyville.ab.ca 2



MUNICIPAL DISTRICT OF BONNYVILLE NO. 87

Bag 1010, Bonnyville AB T9N 2J7 Ph: 780-826-3171 E: planning@md.bonnyville.ab.ca 2024-D-216
DEVELOPMENT PERMIT
OFFICE USE ONLY

DEVELOPMENT PERMIT APPLICATION

I hereby make application under the provisions of the M.D. of Bonnyville No. 87 Land Use Bylaw for a Development Permit in accordance with the plans and supporting information submitted herewith and which form part of this application.

form part of this app APPLICANT INFO				
Name of Applicant:	GOSHEN QUALITY	CARE INC Femi Ajoyi	Contact Name : Fem	ni Ajayi
Daytime Phone #:_		_ Email Address:		
Mailing Address:		,	Postal Co	ode:
Registered owner:_	Daytime Phone #:			
Mailing Address:			Postal Cod	de:
LAND INFORMAT	FION:			
Plan: 062 2963	Block/	Lot Roll N	10. <u>62011940</u>	003
Part (eg NW, SW, NE, S	SE): SW 1/4 Section	:19 Township:	62 Range: 1	W4M
Rural Address: 4	1532 Hwy 55	Is the propert	y currently under sub	division? N/A.
	Ward: 6 Parce			
Proposed Use:)	
☐ Residential	☐ Agricultural		☐ Industrial	☐ Recreational
Development De	escription:	GROUP HOME F	or Children	
☐ SFD ☐ SFD with	n Garage Detached	d Garage □ RTM □	RTM with Garage \Box M	Nobile Home ☐ Shop
☐ Deck ☐ Basemer	nt Development Oth	ner:		
Square Footage:	Building Heigh	t: Setbacks: Fr	ont Rear	Side1 Side2
Have the utility serv	vice providers been cor	ntacted to ensure serv	iceability for this proje	
NOTE: For all deve	elopments other tha ation, indicating the	n home businesses, location of the deve	a SITE PLAN SKETC Hopment in relation	to the property.
Estimated project s	tart date: Oct obs	en 2024Estimate	d completion date:	→ .
Estimated project c	cost or contract price: _	1,000,000.00	Development Fe	e:\$ <u>300.55</u>
The M.D. of Bonnyville descriptions and the rul application. This release Information and Protect	will be disclosing to TELUS, ral serviceable addresses for e of information and disclosure.	ONLY FOR THE PURPOSE OF the properties that are cre ure of release to you, is in a athorizes disclosure based u	F 911, the property owner rated or modified as a result ccordance with Section 17 of pon compelling circumstance	t of the approval of this
application only I unde	ent to allow all authorized pe erstand and agree that this a ny information related there	application for a developmen	nt permit and any developm	nent permit issued pursuant
ane 1 20	ρα	Suspeni	Act	
Date Receipt #: 381668	B Date: Aug 1/2	Signature of A	Applicant	

August 1, 2024

Goshen Quality Care Group Home Application

Children from 0 to 17 years of age may be cared for. Up to 10 children on-site at one time based on the number of available bedrooms. The caregivers work on a rotational basis and the number of caregivers is 3 to 1. Caregivers are on-site 24-7. Caregivers prepare meals for the children.

Children will be enrolled in the local school systems and participate in recreational activities while living at the group home.

If this is approved, the fire authority and health authority inspect the location and then the applicant can apply through the province for this location.

The organization is operating an approved home in the City of Cold Lake.

Femi Ajayi