



Development Services
 1435 Water Street
 Kelowna, BC V1Y 1J4
 250 469-8622
 kelowna.ca

Stratification Of Buildings Application

Name of Applicant(s) _____ Telephone _____

Address of Applicant(s) _____

Name of Owner(s) _____ Telephone _____

Zoning: _____ Lot Size: _____ (Corner or Inside) _____

Documents Received: State of Title _____ Surveyors Certificate _____
 Letter of Authorization if Applicant is not Owner. _____

Legal Description of Property to be Stratified: _____

Civic Address of Property to be Stratified: _____

Type of Building to be stratified:

Two Dwelling Housing:	<input type="checkbox"/>	Semi-detached (Side x Side)	<input type="checkbox"/>	Duplex (Upper/Lower)	<input type="checkbox"/>
Multiple Housing	<input type="checkbox"/>	Number of Units	_____		
Industrial	<input type="checkbox"/>	Number of Units	_____		
Commercial	<input type="checkbox"/>	Number of Units	_____		
Institutional	<input type="checkbox"/>	Number of Units	_____		

Number of units currently: Rented _____ Owner Occupied _____ Vacant _____

Addition Information: _____

Signature of Applicant(s) _____

DEPARTMENTAL USE ONLY

Date Application Received _____ Received By _____

Examination Fee and Receipt Number \$1000.00 R# _____ At time of Application

For Buildings over 5 units x \$100.00
 there is an additional fee per
 unit _____