Schedule B: Proposal to Purchase Municipal-Owned Lands Application

Contact Information

Name	
Mailing Address	
Phone Number	
E-mail Address	

Information on Property of Interest

Civic Address (if applicable)	
Description (Size, Location, etc.) *You may attach a map/sketch (if applicable)	
Existing Use	
Proposed Use	

Do you own a property that abuts the property of interest identified above? (circle one)	Yes	No	Unsure
Do you believe that there are other individuals / organization which may have interest in purchasing the property of interest identified above? (circle one)	Yes	No	Unsure

Pre-Consultation

Have you pre-consulted with the Village Planner concerning this application to purchase surplus land?	Yes	No

Additional Comments

I, _____ (print name), have reviewed the Sale and Disposition of Municipal Land Policy and understand all associated conditions and fees which apply to a municipal land purchase.

Signature: _____
Declared before me
at the Village of Merrickville-Wolford in the United

Counties of Leeds and Grenville this ___ day of

_____, _____.

Signature of Commissioner

Commissioner’s Stamp