

INSPECTIONS & LICENSING

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Office Use Only **Submission Date: Received By: Folder Number:**

Real Property Report (RPR) PLEASE PRINT	
SITE OF REQUEST	
Civic Address:	
Legal Land Description:	Zoning:
	APPLICANT
Name:	Email:
Mailing Address:	Phone:
PROPERTY OWNER	
Name:	Email:
Mailing Address:	Phone:
RPR REQUIREMENT LIST	
1. A minimum of two copies of Real Property Report	
Use Bylaw, and/or various encroachmen	Property Report may be delayed due to contravention(s) of the Land
Name of Applicant (please print)	Signature of Applicant