
Application for Land Review Request for Agricultural Dispositions Grazing Licence (FGL), Grazing Lease (GRL), and Farm Development Lease (FDL)

INSTRUCTIONS / INFORMATION

This application is the first step in the regulatory process to check if vacant public land is available for agriculture purposes. The department will decide if the land can be allocated under disposition, on what terms, and when and how that may happen. Should the department decide that the lands are acceptable for disposition, the department will notify the Applicant of its decision and any next steps. **Email addresses** for the applicants and their respective lawyer/s (if any) are required to complete this form.

IMPORTANT: Completing this application requires the applicant to expend time and resources. However, approval is not guaranteed. The department is not liable for the applicant's costs.

The completed application form signed by all applicants, must be submitted with all supporting documents to: lands-assignments@gov.ab.ca or mailed to the following address:

Alberta Forestry and Parks
Public Lands Disposition Management
ATTN: General Assignment Unit – Land Review Request
5th floor, South Petroleum Plaza
9915 – 108 Street
Edmonton, Alberta T5K 2G8

APPLICATION REQUIREMENTS

The following items are required for the application to be deemed complete as per Public Land Administrative Regulation - Section 9. The Application must be complete with all supporting information and documentation as specified below:

- 1) **Client ID:** All applicants must have a valid Client ID number.
 - a) If applicant(s) does not already have a Client ID number they must obtain one by submitting an **Application/Amendment for Client ID** form. This form can be submitted by either Mail, Fax or Email as indicated on the form ([Application/Amendment Form for Client ID](#)).
 - b) If the applicant(s) already have a Client ID number and require assistance to identify it, please contact lands-assignments@gov.ab.ca
- 2) **Payment of all arrears:** Ensure any debts owed to the Crown for more than 60 days are paid prior to application submission. Note the department will review this statutory requirement based on the application date.

- 3) **Corporate Applicants:** Attach a current Corporate Registry certificate or page of status proving that the corporation has an active registration under the *Business Corporations Act of Alberta*, or is incorporated under the laws of Canada.
- 4) **Government of Alberta Employees / MLAs:** If the applicant is a Government of Alberta Employee (excluding Alberta Health Services employees), attach approval from the Deputy Minister of the department relevant to the employee in accordance with the Code of Conduct & Ethics for the Public Service of Alberta. If the assignee is an MLA, please determine what approval documentation must be added with this application and attach.
- 5) **Application Fee: \$1050.00 (no GST).** All Application fees are **non-refundable**.

Acceptable forms of Payment (make cheques and money orders payable to Government of Alberta)

- Cheque
- Money Order
- Credit Card (GPAS payment system): mail your request to FP.AgriPymt.mailbox@gov.ab.ca
 - When submitting your request, you must provide the following information:
 - **Leaseholder name (Individual or Company)**
 - **Activity ID must be LRR REVCOLL**
 - **Payment Amount**
 - **E-mail address of the person who will make the credit card payment**
 - We will send a transaction request through our GPAS credit card payment system to the email address you have provided.
 - Once you have completed the payment, you will receive an automated email receipt for the amount.

IMPORTANT: Payments can be mailed to the following address:

Alberta Forestry and Parks

Public Lands Disposition Management

Attention: General Assignment Unit – Land Review Request

5th floor, South Petroleum Plaza

9915 – 108 Street

Edmonton, Alberta T5K 2G8

Note: Should you be applying for land for the grazing of Bison or Sheep, consult with the local Agrologist before submitting your application to ensure these uses would be supported.

- **Grazing Bison:** Requires written approval in advance from the Crown, consult the local Agrologist.
- **Grazing Sheep:** May be restricted in some areas; consult the local Agrologist.

If an incomplete application is received by the department, the applicant will be notified of any deficiencies. If deficiencies are not corrected and submitted back to the department within 7 days of the notification, the application will be rejected. Application fees for rejected applications are non-refundable.

STATEMENT REGARDING COLLECTION OF INFORMATION:

The personal information collected on this application form is for the purpose of evaluating the eligibility of the applicant to lease the public lands, and may further be used to assess the effectiveness of the department's public lands program. This collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The information collected is also subject to sections 166 and 167 of the Public Lands Administration Regulation. For questions about the collection of personal information, contact Public Lands

Disposition Management, 5th Floor, 9915-108 Street NW, Edmonton, Alberta, T5G 2G8, or 310-LANDS.

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 for Agricultural Dispositions
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PART I: THE APPLICANT

INDIVIDUAL APPLICANTS

1. Applicant's Full Legal Name		Applicant's Client ID:	
Address:		City:	Prov.:
Postal Code:	Phone:	Email:	
Is the Applicant at least 18 years old?			Yes No
Is the Applicant a Canadian Citizen or a permanent resident?			Yes No
Is the Applicant an employee of the Government of Alberta, (excluding AHS employees) or a Member of the Legislative Assembly of Alberta? If Yes , appropriate documentation must be attached to this application.			Yes No
2. Applicant's Full Legal Name		Applicant's Client ID:	
Address:		City:	Prov.:
Postal Code:	Phone:	Email:	

For additional holders, please print or type the information as above on a plain sheet of paper and attach.

Is the Applicant at least 18 years old?			Yes No
Is the Applicant a Canadian Citizen or a permanent resident?			Yes No
Is the Applicant an employee of the Government of Alberta, (excluding AHS employees) or a Member of the Legislative Assembly of Alberta? - If Yes , appropriate documentation must be attached to this application.			Yes No

CORPORATE APPLICANTS

Is the Applicant applying as a corporation? - If Yes , attach a copy of your certificate of incorporation or evidence of corporate status under one of: the <i>Business Corporations Act, Companies Act, Municipal Government Act, Cooperatives Act.</i>			Yes No
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Is the Applicant incorporated under the <i>Societies Act</i> or the <i>Cooperative Act</i> ? - If Yes , attach a copy of the corporation's bylaws.	Yes	No
Is the Applicant incorporated somewhere other than Alberta? - If Yes , attach evidence that the Applicant is entitled to carry on business in Alberta.	Yes	No
Is the Applicant applying on behalf of a grazing association? - If Yes , attach a list of current members.	Yes	No
If the Applicant is incorporated, the Applicant certifies that: (a) the majority of its shares are owned by, and (b) that the de facto control of the lessee corporation is with the, persons who are Canadian citizens or permanent residents as defined in the <i>Immigration and Refugee Protection Act</i> for their exclusive use and benefit and not in the interests of or for the benefit of any other person.	Yes	No
If the Applicant is incorporated, provide: - a list from an officer of the corporation of the names, addresses and citizenship status of the persons that hold shares in the corporation and the number of shares held by each person, and - a copy of your certificate of incorporation or evidence of corporate status.	Attached	N/A

LEGAL REPRESENTATION (if any) – APPLICANT

Firm:		
Lawyer's Name:	Address:	
City:	Province:	Postal Code:
Email Address:	Phone	

Land Location

Specify "Quarter" for incomplete sections only. Applications may contain only up to 10 quarter sections maximum.

Quarter	Section	Township	Range	Meridian	Area	
					Ha (0.000)	Ac (0.00)
Total						

SIGNATURES

Authorized Signatures

Each of the Applicant(s) certifies that the information is true and complete and agrees to comply with all terms and conditions.

Applicant's Name	Applicant's Signature
1.	
2.	

Dated:

METHOD OF PAYMENT

Please specify the method of payment submitted with this application:

Credit Card

Money Order

Cheque

For the method of payment selected, please identify the date the money was sent to the department:

OFFICE USE ONLY

Application requirements complete: Yes No	Date Reviewed:
Staff Name:	LRR Number:
Staff Position (Delegated Authority):	