

BROKENHEAD OJIBWAY NATION GENERAL LAND USE APPLICATION FORM



BON Lands & Resources Department Box 180, Scanterbury, MB. R0E-1W0 Email:

landsmgr@brokenheadojib waynation.com

APPLICATION #:

LOCATION OF PROPOSED LAND USE	ADDRESS (Inclu	de Ske	tch):	
APPLICANTS NAME:		CONTACT PERSON(s):		
MAILING ADDRESS:	POSTAL C	ODE:	TELEPHONE:	EMAIL:
DESCRIPTION OF PROPORSED LAND	USE:			
IF APPLICABLE, BON MEMBERSHIP N	IUMBER:			
TYPE OF LAND USE:				
PERMIT LEASE EASEN	MENT	LICEN	SE RIGHT C	DF WAY
OTHER				
PROPOSED DATE OF REQUESTED LA	ND USE:			
PROPOSED END DATE OF LAND USE:	:			
PROPOSED AREA OF LAND BEING RE	QUESTED (SKET	гсн то	BE ATTACEHD):	
AREA IN ACRES: ESTIMATED VALUE OF LAND: \$				
 REQUIRED INFORMATION - Complet 2 copies of site plan or sketc 2 copies of land use plan (di 	ch (proposed lan	nd use)	e details, environ	mental considerations)
NOTE: BON RESERVES THE RIGHT TO LAND USE INSTRUMENT	INSPECT THE LA	AND TC	CONFIRM SPECI	FIED LAND USE IDENTIFIED IN THE
DATE: APPLICANT SIGNATURE:				
	FOR OF	FICE USE	ONLY	
DATE RECEIVED:	PLAN REVIEW	NO.:		FEE:
BON (NAME OF RESERVE)			<u></u>	
APPROVED BY:		PO	SITION:	
BCR No. (If Applicable):				