

PLEASE REFER TO ONTARIO REGULATION 545/06 FOR ITEM REFERENCES 1 THROUGH 16

1. a) Applicant Information

Complete the information below. All communication will be directed to the **Primary Contact** with a copy of to the Owner.

Registered Owner(s):

Name:

Address:

City:
Province:

Postal Code:

Phone:

Alternate Phone

Fax:

Email:

Applicant (complete if the Applicant is not the Owner):

Name:

Address:

City:
Province:

Postal Code:

Phone:

Alternate Phone:

Fax:

Email:

Agent Authorized by the Owner to file the Application (if applicable):

Name:

Address:

City:
Province:

Postal Code:

Phone:

Alternate Phone:

Fax:

Email:

1. b) Which of the above is the Primary Contact? Owner Applicant Agent

2. Mortgage Information

Please list the names and addresses of the holders of any mortgages, charges or other encumbrances in respect of the subject land.

3. Provincial Policy		
Is the application consistent with provincial policy statements?		<input type="checkbox"/> YES <input type="checkbox"/> NO
Please explain:		

4.	Official Plan Designation
Please indicate what the current Official Plan designation is and how the application conforms to Official Plan regulations.	

5.	Zoning Information
Current Zoning:	Proposed Zoning:
What is the nature and extent of the rezoning requested?	
What is the reason the rezoning is being requested?	

6.	Legal Description
Geographic Township / Planning Area:	
Lot(s):	Parcel(s):
Mining Claim(s):	Registered Plan Number:
Municipal Street Address (if applicable):	
Assessment Roll Number:	

7. Land Description		
Frontage (m):	Depth (m):	Area (m ² or ha):
7. b) Existing use(s) of the property:		
7. c) The date the subject land was acquired:		

7. d)	The type and number of existing buildings/structures:
7. e)	Use of existing buildings/structures (specify):
7. f)	The date any existing buildings or structures on the subject land were constructed:
7. g)	The length of time that the existing uses of the subject land have continued:
7. h)	The previous use(s) of the subject land:
7. i)	The type and number of proposed buildings/structures:
7. j)	The proposed use of buildings/structures:

8.	Access				
<input type="checkbox"/>	Private Street (not usually permitted)	<input type="checkbox"/>	Provincial Highway	<input type="checkbox"/>	Water
<input type="checkbox"/>	Right of Way (not permitted)	<input type="checkbox"/>	Assumed Municipal Street	<input type="checkbox"/>	Other (Specify)
If by water, please list the parking and docking facilities used or proposed to be used as well as the approximate distance from the subject lands and the nearest public road.					

9.	Water Supply			
Water supply on the subject lands shall be provided by:				
<input type="checkbox"/>	Municipal piped water	<input type="checkbox"/>	Privately owned & operated individual wells for each lot	
<input type="checkbox"/>	Privately owned & operated communal well	<input type="checkbox"/>	Other (specify)	

10.	Sewage Disposal			
Sewage disposal on the subject lands shall be provided by:				
<input type="checkbox"/>	Municipal sanitary sewers	<input type="checkbox"/>	Privately owned individual septic system for each lot	
<input type="checkbox"/>	Privately owned communal collection	<input type="checkbox"/>	Other (specify)	
If the application would permit development on privately owned and operated individual or communal septic systems, and more than 4,500 litres of effluent produced per day as a result of the development being completed, a <i>service options report</i> and a <i>hydrogeological report</i> is required.				

11.	Storm Drainage		
Storm drainage on the subject property will be provided by:			
<input type="checkbox"/>	Municipal sewers	<input type="checkbox"/>	Ditches or Swales
		<input type="checkbox"/>	Other (specify)

12.	Employment Areas		
Does the rezoning request remove land from an area of employment?		<input type="checkbox"/>	YES
		<input type="checkbox"/>	NO
Explain:			

13.	Other Applications Under the Planning Act		
Has the property ever been subject to an application under the Act?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
If the answer to Section 13 was 'yes', please indicate the file number and status of the application.			

14.	Owner's Authorization										
This must be completed by the Owner if the <u>OWNER IS NOT FILING THE APPLICATION.</u>											
Note: If there are multiple Owners, an authorization letter from each Owner (with dated, original signature) is required OR each Owner must sign the following authorization.											
<p>I, (we) _____, being the <small style="margin-left: 200px;">Print name(s) of Owner, individual or company</small></p> <p>registered Owner(s) of the subject lands, hereby authorize _____ <small style="margin-left: 350px;">Print name of agent and/or company (if applicable)</small></p> <p>to prepare and submit an Application for Zoning By-law amendment.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-top: 1px solid black; text-align: center;">Signature</td> <td style="width: 10%; border-top: 1px solid black; text-align: center;">Day</td> <td style="width: 20%; border-top: 1px solid black; text-align: center;">Month</td> <td style="width: 10%; border-top: 1px solid black; text-align: center;">Year</td> </tr> <tr> <td style="width: 50%; border-top: 1px solid black; text-align: center;">Signature</td> <td style="width: 10%; border-top: 1px solid black; text-align: center;">Day</td> <td style="width: 20%; border-top: 1px solid black; text-align: center;">Month</td> <td style="width: 10%; border-top: 1px solid black; text-align: center;">Year</td> </tr> </table>				Signature	Day	Month	Year	Signature	Day	Month	Year
Signature	Day	Month	Year								
Signature	Day	Month	Year								

IMPORTANT:
 If the Owner is an incorporated company, the company seal shall be applied in the signature block above.

15. Declaration

This must be completed by the person filing the application for the proposed amendment and in the presence of a Commissioner of Oaths.

I, _____ of the _____
Print (name of applicant) Print (Name of City, Town, Township, etc.)

in the Region/County/District of _____ solemnly declare that all of the statements
Print Region/County/District

contained in this Application for Zoning By-law Amendment at _____,
(description of subject land)

and all supporting documents and plans are true and complete, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the *Canada Evidence Act*.

Declared before me at the Region/County/District of _____,

in the Municipality of _____, this

_____ day of _____, _____
(Day) (Month) (Year)

Signature

Please Print name of Applicant

Commissioner of Oaths

16. Municipal Freedom of Information Declaration

In accordance with the provisions of the Planning Act, it is the policy of the Town Planning Department to provide public access to all development applications and supporting documentation.

In submitting this development application and supporting documentation, I(we) _____
(please print name) the Owner/applicant/authorized agent, hereby acknowledge the above-noted policy and provide my/our consent, in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agents, consultants and solicitors, will be part of the public record and will also be available to the general public.

Signature Day Month Year

Signature Day Month Year

OWNER/APPLICANT'S INFORMATION: (Mandatory, please print)

Name: _____ Mailing Address: _____
Telephone No. _____
E-mail Address: _____
Fax No. _____