



APPLICATION FOR:

- Zoning By-Law Amendment
 Temporary Use By-Law
 Holding Zone Removal
 Other: _____

DATE RECEIVED _____

PROPERTY ROLL NO. _____

Completeness of the Application

The information in this form **must** be provided by the applicant with the appropriate fee and deposit. If the information, fee and deposit are not provided, the application will be returned or refused for further consideration until the required information and payments have been provided.

Section 7, Sworn Affidavit, must be signed by all owners in front of a commissioner, or Sections 7.1 and 7.2 must be completed by the property owner if an agent is making this application on their behalf.

Submission of the Application

- 1 copy of the completed application form and a copy of the sketch are required by the Township. (For large drawings, please provide digital copy)
- Application Fee and Deposit pursuant to By-Law 17-2015 as amended by 16-2016
- Measurements to be in metric units.
- The Conservation Authority may require a processing fee for reviewing application.

If you have any questions, please contact the Municipal Office at:
Township of East Garafraxa
Administration Office
374028 6th Line Amaranth ON L9W 0M6
Telephone: (519) 928-5298 or 941-1007
Fax: (519) 941-1802

Please Print and Complete or (✓) Appropriate Box(es)

| 1. Applicant and Ownership Information | | | |
|--|--|--------------------|----------------|
| 1.1 | Name of Applicant | Home Telephone No. | Cell Phone No. |
| | Address | | Postal Code |
| | Email | | |
| 1.2 | Name of Owner(s) If different from the applicant an owner's authorization is required in Section 7, if the applicant is not the owner. | | |
| | Address | Home Telephone No. | Cell Phone No. |
| | Email | | |
| 1.3 | Name of Contact Person if different than the applicant (this may be a person or firm acting on behalf of the applicant). | Home Telephone No. | Cell Phone No. |
| | Address | Postal code | Email |
| 1.4 | Any Mortgages, Charges, or other encumbrances in respect of the subject land: | | |
| | Name | Address | |
| | Name | Address | |

2. Location and Description of the Subject Land

| | | | |
|-----------------------------|--|---|----------------------|
| 2.1 County: Dufferin | Municipality Township of East Garafraxa | | |
| Concession Number | Lot | Registered Plan/Lot(s) / Block(s) | |
| Reference Plan No. | Part Number (s) | Street/Road: | Street/Emergency No. |
| Width of street/road ____m | <input type="checkbox"/> Municipal year round maintained road <input type="checkbox"/> County Road <input type="checkbox"/> Seasonal or private road | | |
| Frontage (m) | Entire Property | Affected Area (if amendment does not affect the entire property) | |
| Depth (m) | | | |
| Area (hectares) | | | |

3. Zoning and Official Plan Information

| | | | | | |
|---|--|--------|---------|--------|---------|
| 3.1 Current zoning of the subject : | 3.2 Proposed Zoning: | | | | |
| 3.3 Related Applications under the Planning Act, if any: | 3.4 Has subject lands ever been subject of an Application under the Planning Act? <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">File #</td> <td style="text-align: right;">Status:</td> </tr> <tr> <td>File #</td> <td style="text-align: right;">Status:</td> </tr> </table> | File # | Status: | File # | Status: |
| File # | Status: | | | | |
| File # | Status: | | | | |
| 3.5 Nature & Extent of the proposed zoning | | | | | |
| | | | | | |
| | | | | | |
| 3.6 Purpose/Reason why the rezoning is requested: | | | | | |
| | | | | | |
| | | | | | |
| 3.7 Current Official Plan Designation: | | | | | |
| | | | | | |
| 3.8 Provide an explanation of how the application conforms to the Official Plan | | | | | |
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|---|--|--|---|---|
| 4 Consistency with Policy Documents | | | | |
| 4.1 Does this application | | | | |
| Alter the boundary of a settlement area? | | <input type="checkbox"/> yes | <input type="checkbox"/> no | |
| Create a new settlement area? | | <input type="checkbox"/> yes | <input type="checkbox"/> no | |
| Remove lands from an employment area? | | <input type="checkbox"/> yes | <input type="checkbox"/> no | |
| If yes, provide details of any Official Plan or Official Plan Amendment | | | | |
| 4.2 Are the subject lands in an area where conditional zoning may apply? <input type="checkbox"/> yes <input type="checkbox"/> no | | | | |
| If yes, provide details of how this application conforms to Official Plan conditional zoning policies. | | | | |
| 4.3 Is the proposed application consistent with the Provincial Policy Statement and any other Policy Statements issued under subsection 3(1) of the Planning Act: <input type="checkbox"/> yes <input type="checkbox"/> no | | | | |
| Name of individual having knowledge of the policy statements. A report may be required to accompany this application and support the above statement of consistency. | | | Signature | |
| 4.4 Are the subject lands within the Greenbelt Plan area <input type="checkbox"/> yes <input type="checkbox"/> no | | 4.5 Are the subject lands within the Greater Golden Horseshoe Growth Plan area <input type="checkbox"/> yes <input type="checkbox"/> no | | |
| 4.6 Does the proposed application conform to or does not conflict with the Provincial Plans, including the Greenbelt Plan and Growth Plan: <input type="checkbox"/> yes <input type="checkbox"/> no | | | | |
| Name of individual having knowledge of the plans A report may be required to accompany this application and support the above statement of consistency. | | | Signature | |
| 5. Land Use | | | | |
| 5.1 Date property acquired <input type="checkbox"/> Unknown | | | | |
| 5.2 Existing Use | | 5.3 Proposed Use | | |
| 5.4 Environmental | | | | |
| Water <input type="checkbox"/> Private Well <input type="checkbox"/> Communal Well <input type="checkbox"/> Municipal Well | Sewage Disposal <input type="checkbox"/> Private Septic <input type="checkbox"/> Communal System <input type="checkbox"/> Other: _____ | Storm Drainage <input type="checkbox"/> Sewer <input type="checkbox"/> Ditches <input type="checkbox"/> Swales <input type="checkbox"/> Others: _____ | Tile Drainage <input type="checkbox"/> no <input type="checkbox"/> yes, please mark on site plan location of tile runs | Biosolids <input type="checkbox"/> no <input type="checkbox"/> yes, please mark on site plan location and timing of applications |
| Does the proposed development produce greater than 4500 litres of effluent per day? <input type="checkbox"/> yes <input type="checkbox"/> no | | | | |
| If yes, attach a servicing options report and hydro geological report. | | | | |

| 5.5 Existing and Proposed buildings and structures (complete chart for each existing and proposed building or structure) | | | | | | | | | | |
|---|--|---|------|------|--|------------|---------------------------------|------------------------|---|--|
| Type of building or structure | | Setbacks (m) | | | | Height (m) | Dimensions (m x m) | Area (m ²) | Date of Construction or proposed construction | Time use has continued (for existing buildings and structures) |
| | | Front | Rear | Side | Side | | | | | |
| | <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| | <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| | <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| | <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| | <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| | <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| 5.6 Agriculture | | | | | | | | | | |
| <p>Are lands part of Nutrient Management Plan?</p> <p><input type="checkbox"/> no <input type="checkbox"/> yes, please provide plan number _____ and date approved by OMAFRA _____</p> | | | | | | | | | | |
| <p>Are there any livestock facilities within 500 metres of the subject lands? <input type="checkbox"/> no <input type="checkbox"/> yes If yes, complete the following for each farm operation:</p> | | | | | | | | | | |
| Animal type | | Barn dimensions of all barns capable of housing livestock | | | Number of tillable hectares of farm land | | Type of Manure storage | | | |
| Animal type | | Barn dimensions of all barns capable of housing livestock | | | Number of tillable hectares of farm land | | Type of Manure storage | | | |
| 5.7 Statement of Requirements: Please complete the following chart | | | | | | | Zone Requirements: (Office Use) | | | |
| Lot Area (hectares) | | | | | | | | | | |
| Frontage (m) | | | | | | | | | | |
| Front Yard (m) (distance between front lot line and building or structure) | | | | | | | | | | |
| Rear Yard (m) | | | | | | | | | | |
| Interior Side Yard (m) | | | | | | | | | | |
| Exterior Side Yard (m) | | | | | | | | | | |
| Height (m) | | | | | | | | | | |
| Lot Coverage (building footprint as % lot area) | | | | | | | | | | |
| Dwelling Size (m ²) | | | | | | | | | | |
| Landscaping (% of lot area) | | | | | | | | | | |

6. Sketch

6.1 The application shall be accompanied by a sketch showing the following: **(Please Use Metric Units)**

- the boundaries and dimensions of the subject land.
- the location, size and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the front yard lot line, rear yard lot line and side yard lot lines.
- the approximate location of all natural and artificial features on the subject land and on land that is adjacent to the subject land that may affect the application. Examples include buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells and septic tanks.
- the current use on land that is adjacent to the subject land.
- the location width and name of any road within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road or a right of way.
- the location and nature of any easement affecting the subject land.

7 Affidavit, Sworn Declaration and Authorizations

7.1 Affidavit or Sworn Declaration.
I, _____ of the _____
in the _____ make oath and say (or solemnly declare) that the information
contained in this application is true and that the information contained in the documents that accompany this application is true.
Sworn (or declared) before me
at _____
in the _____
this _____ day of _____ Applicant

Commissioner of Oaths Applicant

7.2 If the applicant is not the owner of the land that is the subject of this application, the written authorization of the owner that the applicant is authorized to make the application must be included with this form or the authorization set out below must be completed.

I, _____, am the owner of the land that is the subject of this application and I authorize _____ to make this application on my behalf.

Date Signature of Owner

7.3 If the applicant is not the owner of the land that is the subject of this application, complete the authorization of the owner concerning personal information set out below.

I, _____, am the owner of the land that is the subject of this application and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I authorize _____, as my agent for this application, to provide any of my personal information that will be included in this application or collected during the processing of the application.

Date Signature of Owner

7.4 **Permission to Enter**

I _____ am the owner of the land that is the subject of this application and I authorize Township staff or their representative to enter my property for the purposes of evaluating this application.

Date Signature of Owner

8. Consent of the Owner

8.1 Complete the consent of the owner concerning personal information set out below.

Consent of the Owner to the Use and Disclosure of Personal Information

I, _____, am the owner of land that is the subject of this application and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected under the authority of the **Planning Act** for the purposes of processing this application.

Date Signature of Owner