



TOWNSHIP OF EAST GARAFRAXA
 065371 DUFFERIN COUNTY ROAD 3 • UNIT 2
 EAST GARAFRAXA • ON • L9W 7J8
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Township of East Garafraxa Pre-Application Consultation Form

Office Use Only

File Number:			
Application Type:			
Roll Number:			
Date Received:		Date Deemed Complete:	

Information and documents are to be submitted electronically in pdf format, or in hard copy and must be legible.

CHECKLIST

- Review of Pre-Application Consultation Information
- Site Plan of the subject property indicating:
 - property address/location, property lot lines and setbacks;
 - location of proposed development/building(s);
 - location of existing development/building(s);
 - proposed use;
 - proposed and/or existing entrance; and
 - any other pertinent information
- Drawings of proposed development/building(s) including height, size and use, if applicable
- Cover letter containing additional information and/or enclosed supporting documents, if applicable
- Pre-Consultation fee and deposit payment in accordance with the applicable Tariff of Fees for Planning Matters By-law, as amended
- Completed owner authorization form (required if the applicant and/or agent is not the registered owner(s)).
- Any other information that may be pertinent

1. Applicant Information

Name(s):	
Mailing Address:	
Telephone Number(s):	
Email Address(es):	

2. Registered Owner(S) Same As Applicant

Name(s):	
Mailing Address:	
Telephone Number(s):	
Email Address(es):	

3. Agent, Solicitor or Consultant (if applicable)

Name:	
Mailing Address:	
Telephone Number:	
Email Address:	

4. Location and Description of the Subject Property

Emergency/Street Number and Street/Road Name	
Legal Description:	
Roll Number:	
Lot Frontage (m):	
Lot Depth (m):	
Lot Area (hectares):	
Current Use of Property:	
Proposed Use of Property (If Applicable)	
Current Zoning:	
Current Official Plan Designation:	

5. Description of the Subject Property and Proposed Development:

6. List of Supporting Documents Enclosed with the Application

Pre-Consultation Request Fee: \$1,000.00

Fees are subject to change. Please check the Township website for more information.

SIGNATURES

Registered Owner(s)

Date MM/DD/YYYY

Registered Owner(s)

Date MM/DD/YYYY

Applicant/Agent

Date MM/DD/YYYY

Please note: This form must be completed by the Owner(s) or Authorized Applicant/Agent and signed by all Owner(s). All Correspondence, notices, etc. initiated by the Township in respect to this application will, unless requested, be directed to the applicant's agent noted above except where no agent is employed, then it will be directed to the applicant.

The personal information collected on this form is collected under the authority of the *Planning Act* and will be used during the Pre-Application Consultation process. Questions about the collection of information should be directed to the Clerk's Department.