

Date: _____

1 GENERAL INFORMATION

Registered Owner	Telephone No.	Email Address
Address	Postal Code	
Applicant/Agent	Telephone No.	Email Address
Address	Postal Code	
Agent or Solicitor	Telephone No.	Email Address
Address	Postal Code	
Mortgagee	Telephone No.	
Address	Postal Code	

All correspondence should be sent to: Owner Applicant Agent/Solicitor

If known, date property was purchased by current owner _____

2 LOCATION OF PROPERTY

Lot(s)	Concession
Reference Plan No.	Roll No.
36R-	4801
Municipal Address	Geographic Ward
<input type="checkbox"/> Airy <input type="checkbox"/> Dickens <input type="checkbox"/> Lyell <input type="checkbox"/> Murchison <input type="checkbox"/> Sabine	

Entire Property:	Depth (metres)	Area (acres)
Frontage (metres)		
Land Affected (if only a portion)		

4 RELATED LAND DIVISION

- a. Is the 66 ft. shoreline allowance owned by the applicant/owner (if applicable)? Yes No
- b. If a consent to sever is required, has a severance application been made? Yes No
 File No. _____ Status of Application _____
- c. Does the proposed amendment involve a subdivision or condominium application? Yes No
 File No. _____ Status of Application _____
- d. Has the property been subject to an easement? Yes No
 If yes, please provide the location and nature of the easement _____
- e. Has the property ever been subject of an application for minor variance under Section 45 of the Planning Act? Yes No

6 EXISTING USE OF BUILDING (If known, please indicate on the line provided the number of years with the existing use)

- Permanent Residential _____ Seasonal Cottage _____ Industrial _____ Commercial _____
- Farmland _____ Vacant _____ Other _____

7 LIST ANY EXISTING BUILDINGS OR STRUCTURES ON THE PROPERTY

Type of Buildings or Structures	All Yard Setbacks				If known, Year constructed	Building Dimensions (metric units)	Ground Floor Area	Building Height
	Front	Rear	Side	Side				
1								
2								
3								

8 Proposed Use of Property

- Permanent Residential Seasonal Cottage Industrial Commercial
- Farmland Vacant Other

Describe the reasons why it is not possible to comply with the provisions of the Zoning By-Law:

9 List of Proposed Buildings or Structures

Type of Building or Structures	All Yard Setbacks				If known, Year constructed	Building Dimensions (metric units)	Ground Floor Area	Building Height
	Front	Rear	Side	Side				
1								
2								
3								

10 Township of South Algonquin Official Plan Designation

a. Current: _____

11 Township of South Algonquin Zoning Designation

a. Current _____
 d. What is the current uses of adjacent properties? _____

12 Types of Servicing

This property will be serviced by (please check appropriate boxes)

- a. Water Supply Private Well Other (specify) _____
- b. Sewage Disposal Private septic Other (specify) _____
- c. Storm Drainage System Ditches & Swales Pipes/Culvert
- d. Road Access or Frontage Name of Road _____
 A Local Public Road
 A Provincial Highway
 Private Road or Right-of-Way
 Other (specify) _____
- e. Lake Frontage Water Access Only
 Name of Lake _____
- f. If water access only, is there a parking/docking facility available? Yes No
- g. If yes, is the parking/docking facility on a public road? Yes No
 Please provide the name of the public road to which the parking/docking facility is located _____
- h. What is the approximate distance to the subject land from the docking/parking facility?

13 Required Sketch/Drawing

- a) The boundaries and dimensions of the subject land;
- b) 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 line, rear yard lot line and the side yard lot line;
- c) The approximate location of all natural and artificial features on the subject land and on land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application. Examples include buildings, railways, roads, watercourses, drainage ditches, rivers or stream banks, wetlands, springs, sinkholes or erosion features, wooden areas, wells and septic tanks;
- d) The current uses on the land that is adjacent to the subject land;
- e) The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public traveled road, a private road or a right of way;
- f) If access to the subject land is by water only, the location of the parking and docking facilities to be used;
- g) The location and nature of any easement affecting the subject land.

14 Affidavit or Sworn Declaration

I, _____ of the _____
 in the _____
 (name of District, Region, County, Province)

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, 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 _____
 (Municipality)

in the _____
 (District)

this _____ day of _____, 20_____.

 Applicant Signature

 Commissioner of Oath

*Township of South Algonquin - 7 Third Avenue - P.O. Box 217 - Whitney, Ontario - K0J 2M0
 TEL: 613-637-2650 FAX: 613-637-5368 www.southalgonquin.ca*

Applicant's Consent (Freedom of Information), Authorization for Access & Signage Agreement:

In accordance with the provision of the Planning Act, it is the policy of the Municipality to provide public access for prescribed planning applications. Additionally, notice signs, provided by the Municipality for your convenience, must be posted on the subject lands such that they are visible and legible from a public highway, providing notification to passers-by and assisting staff, Council or the Committee of Adjustment in locating the property during site visits in advance of the public meeting. In submitting this development application and supporting documentation,

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

of the Township of South Algonquin in the District of Nipissing hereby acknowledge the above-noted requirement 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, as well as commenting letters of reports issued by the municipality and other review agencies will be part of the public record and will also be available to the general public. **AND;**

Hereby confirm that the required notice signs will be posted on the lands as instructed and further indemnify the Municipality from any damages resulting from the improper postings of this sign. **AND;**

Hereby permit Municipal Staff and its representatives to enter upon the premises of the subject property for the purpose of this application.

Signature of Owner(s)

Date

Signature of Owner(s)

Date

Signature of Witness

Date

COSTS OF APPLICATION

(MUST be signed in the presence of a Witness):

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

Of the Township of South Algonquin in the District of Nipissing hereby acknowledge receiving and reviewing the Township of South Algonquin's Schedule of Fees By-Law related to planning matters. I further understand and agree to be bound by the fees and specifically agree that I shall pay full cost recovery for any planning matters listed in the fee schedule.

I/We understand and agree that the Fee submitted with this application covers only the anticipated processing cost (i.e. review by Township Staff, Public Meeting etc.). It is further understood and agreed that any additional costs or requirements, incurred and charged by the Municipality (i.e. Township Planner, Legal or Engineering Fees, Ontario Land Tribunal hearing costs, Agreements, Special Studies, other Approvals or Applications and any other related matters), will be my/our responsibility to pay and/or reimburse the Municipality for same. Failure to pay all associated costs shall result in refusal of this application and if not paid forthwith after being invoiced, I/We agree that fees may be added to my municipal tax bill and collected by the Municipality in the same manner such as municipal taxes, or by any other means legally available to the Municipality.

DECLARED before me/us at the

City/Town/Municipality of _____ in the **County/Region/District**
of _____

this _____ day of _____, 20_____.

Signature of Owner(s)

Date

Signature of Owner(s)

Date

Signature of Witness

Date

OWNER(S) AUTHORIZATION OF AGENT

(Only required if the applicant or agent is not the registered owner):

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

Of the Township of South Algonquin in the District of Nipissing.

Registered owner of _____
Property Description

Do hereby authorize _____
Name(s) of Authorized Agent(s)

To act as my (our) agent for the purposes of this application.

Signature of Owner(s) *Date*

Signature of Owner(s) *Date*

Signature of Witness *Date*