

MUNICIPALITÉ • EAST FERRIS • MUNICIPALITY



390 HIGHWAY 94, CORBEIL, ONTARIO P0H 1K0
TEL.: (705) 752-2740 FAX.: (705) 752-2452

APPLICATION FOR A ZONING BY-LAW AMENDMENT

APPLICATION FEE: \$1300.00 (made payable to the Municipality of East Ferris by cheque or cash). All fees are non-refundable.

It is required that three (3) copies of the application be filed together with sketches with the Secretary-Treasurer of the Municipality of East Ferris and be accompanied by the fee. In accordance with Section 1.0.1 of the Planning Act, R.S.O. 1990 information and material required to be provided to a municipality or approval authority as part of this application shall be considered public information and shall be made available to the public. Applications to amend zoning by-laws in the Municipality of East Ferris are submitted pursuant to Section 34 of the *Planning Act*.

Failure to submit all of the required information may prevent or delay the consideration of the application.

1. APPLICANT INFORMATION

Owner(s): _____

Home Phone: _____ Alternate Phone: _____

Fax Number: _____ Email: _____

Mailing Address: _____ City/Town/Village/Hamlet: _____

Postal Code: _____

Municipal Address of lands affected (911 Number) _____

Authorized Agent/Applicant Solicitor (if any): _____

Phone Number: _____ Alternate Phone: _____

Address: _____ City/Village: _____

Fax: _____ Email: _____

Specify to whom all communications should be sent (check appropriate space):

Owner Agent Solicitor Both

2. LOCATION OF SUBJECT LAND:

Lot(s) _____ Concession No(s). _____ Registered Plan (Subdivision) No. _____

Lot(s) (No(s) _____ Reference Plan (Survey) No. _____ Part(s) _____

Parcel(s) _____ Hamlet (Asterville, Corbeil, Derland) _____

Are there any easements or restrictive covenants affecting the subject land?

Yes

No

Please Describe: _____

3. DESCRIPTION OF SUBJECT LAND:

Description of Land:

Frontage: _____ Depth: _____ Area: _____

4. DATE OF ACQUISITION OF SUBJECT LAND: _____

5. NAMES AND ADDRESSES OF ANY MORTGAGES, HOLDERS OF ANY CHARGES OR OTHER ENCUMBRANCERS:

6. EXISTING USES OF SUBJECT LAND:

Existing Use(s): _____

Number of Buildings and Structures (existing) on land subject to the application: _____

Use(s) of Buildings and Structures (existing) on land subject to the application:

7. PARTICULARS OF ALL BUILDINGS AND STRUCTURES (EXISTING) ON THE SUBJECT LAND. SPECIFY GROUND FLOOR AREA, GROSS FLOOR AREA, NUMBER OF STOREYS, WIDTH, LENGTH, HEIGHT, ETC.

TYPE OF EXISTING BUILDING(S) OR STRUCTURE(S)	Ground Floor Area	Gross Floor Area	Number of Storeys	Width	Length	Height

Not Applicable (please check if there are no existing building(s) or structure(s))

8. LOCATION OF ALL BUILDINGS AND STRUCTURES (EXISTING) ON THE SUBJECT LAND. SPECIFY THE SETBACK DISTANCES FROM THE SIDE, REAR AND FRONT LOT LINES.

TYPE OF EXISTING BUILDING(S) OR STRUCTURE(S)	Side Lot Line	Side Lot Line	Front Lot Line	Rear Lot Line

Not Applicable (please check if there are no existing building(s) or structure(s))

9. DATE OF CONSTRUCTION OF ALL BUILDING(S) AND STRUCTURE(S) ON SUBJECT LAND:

10. PROPOSED USES OF SUBJECT LAND:

Proposed Use(s): _____

Number of Buildings and Structures (proposed) on land subject to this application _____
 Use(s) of Buildings and Structures (proposed) on land subject to the application:

11. PARTICULARS OF ALL BUILDINGS AND STRUCTURES (PROPOSED) ON THE SUBJECT LAND. SPECIFY GROUND FLOOR AREA, GROSS FLOOR AREA, NUMBER OF STOREYS, WIDTH, LENGTH, HEIGHT, ETC.

TYPE OF PROPOSED BUILDING(S) or STRUCTURE(S)	Ground Floor Area	Gross Floor Area	Number of Storeys	Width	Length	Height

Not Applicable (please check if there are no proposed building(s) or structure(s))

12. LOCATION OF ALL BUILDINGS AND STRUCTURES (PROPOSED) ON THE SUBJECT LAND. SPECIFY THE SETBACK DISTANCES FROM THE SIDE, REAR AND FRONT LOT LINES.

TYPE OF PROPOSED BUILDING(S) OR STRUCTURE(S)	Side Lot Line	Side Lot Line	Front Lot Line	Rear Lot Line

Not Applicable (please check if there are no proposed building(s) or structure(s))

13. PRESENT OFFICIAL PLAN DESIGNATION (PLEASE CONTACT PLANNING & DEVELOPMENT STAFF):

14. PLEASE PROVIDE AN EXPLANATION OF HOW THE APPLICATION CONFORMS TO THE OFFICIAL PLAN(PLEASE CONTACT PLANNING & DEVELOPMENT STAFF):

15. PRESENT ZONING BY-LAW PROVISIONS APPLYING TO LAND (PLEASE CONTACT PLANNING & DEVELOPMENT STAFF):

16. ZONING BY-LAW NUMBER (PLEASE CONTACT PLANNING & DEVELOPMENT STAFF):

17. WHY IS THE ZONING BY-LAW AMENDMENT BEING REQUESTED? PLEASE PROVIDE A DETAILED EXPLANATION (the reason why the Zoning By-law Amendment has been requested).

18. PROPOSED ZONING BY-LAW AMENDMENT (nature and extent of the rezoning requested):

19. IS THE SUBJECT LAND IN AN AREA WHERE THE TOWNSHIP HAS PRE-DETERMINED THE MINIMUM AND MAXIMUM DENSITY REQUIREMENTS?

Yes

No

Please list the requirements: _____

20. IS THE SUBJECT LAND IN AN AREA WHERE THE TOWNSHIP HAS PRE-DETERMINED THE MINIMUM AND MAXIMUM HEIGHT REQUIREMENTS?

Yes

No

Please list the requirements: _____

21. IS THE APPLICATION TO IMPLEMENT AN ALTERATION TO THE BOUNDARY OF AN AREA OF SETTLEMENT OR TO IMPLEMENT A NEW AREA OF SETTLEMENT?

Yes

No

If 'yes', please list and explain the policies that deal with this alteration:

22. IS THE APPLICATION TO REMOVE LAND FROM AN AREA OF EMPLOYMENT (PLEASE CONTACT PLANNING & DEVELOPMENT STAFF):

Yes

No

If 'yes', please list and explain the policies that deal with this alteration:

23. IS THE SUBJECT LAND WITHIN AN AREA WHERE ZONING WITH CONDITIONS MAY APPLY? (PLEASE CONTACT PLANNING & DEVELOPMENT STAFF).

Yes

No

If 'yes', please list and explain how the application conforms to the Official Plan Policies relating to zoning with conditions:

24. ACCESS (Please check all that apply):

C. Access:

- Unopened Road Allowance
- Open Municipal Road
- Private Right of Way
- Provincial Highway
- Other (specify)

Name of Road/Street: _____

Is Access only by water? Yes No

If the answer to the above question was “yes” describe the boat docking facilities to be Used and the approximate distance of these facilities from the subject land and the nearest opened public road: _____

25. SERVICES (PLEASE CHECK ALL THAT APPLY):

A. Water Supply:

B. Sewage Disposal:

- Municipally owned and Operated
- Privately Owned and Operated
- Individual
- Communal
- Lake
- Dug Well
- Drilled Well
- Other(Specify)

- Municipally owned and Operated
- Privately Owned and Operated
- Individual
- Communal
- Septic Tank/Field Bed
- Holding Tank
- Other (Specify)

C. Storm Drainage:

- Sewers
- Ditches
- Swales
- Other (Specify)

D. Would more than 4500 litres of effluent be produced per day as a result of the development being completed?

Yes No

If ‘yes’ a servicing options report and hydrogeological report would be required.

26. IF KNOWN, HAVE THE LANDS:

A) Ever been, or is now, part of an application for:

D) Official Plan Amendment?

Yes No Unknown

If 'yes', file # _____ Status of Application _____

II) Plan of Subdivision?

Yes No Unknown

If 'yes', file # _____ Status of Application _____

III) Consent?

Yes No Unknown

If 'yes', file # _____ Status of Application _____

IV) Rezoning?

Yes No Unknown

If 'yes', file # _____ Status of Application _____

V) Minor Variance?

Yes No Unknown

If 'yes', file # _____ Status of Application _____

B. Ever been the subject of a Minister's Zoning Order?

Yes No Unknown

If 'yes', what is the Ontario Regulation Number _____

27. IS THE SUBJECT LAND WITHIN AN AREA OF LAND DESIGNATED UNDER ANY PROVINCIAL PLAN OR PLANS?

Yes No

Name of Plan(s): _____

28. IF THE ANSWER TO THE ABOVE IS “YES”, DOES THE APPLICATION CONFORM TO OR DOES NOT CONFLICT WITH THE APPLICABLE PROVINCIAL PLAN OR PLANS?

Yes No

Name of Plan(s): _____

29. IS THE APPLICATION FOR AMENDMENT TO THE ZONING BY-LAW CONSISTENT WITH THE PROVINCIAL POLICY STATEMENTS ISSUED UNDER SUBSECTION 3(1) OF THE PLANNING ACT?

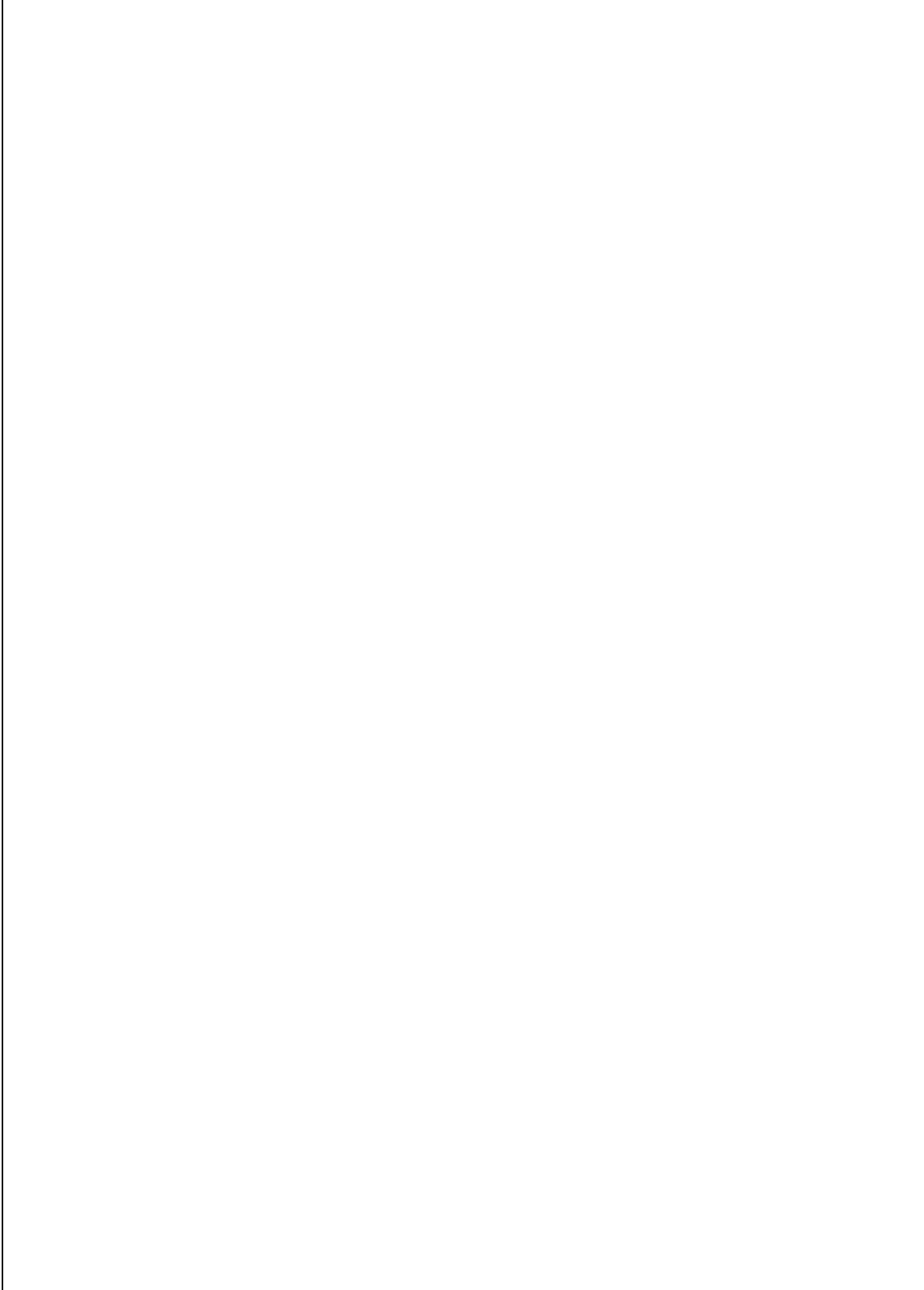
Yes No

30. DO YOU HAVE ANY KNOWLEDGE OF ENDANGERED SPECIES OR SPECIES AT RISK OR KNOWLEDGE OF POTENTIAL HABITAT FOR SUCH SPECIES ON THE SUBJECT LAND OR ADJACENT LANDS?

Yes No

If “yes”, please explain: _____

31. REQUIRED SKETCH (Return this sketch with the application form. Without a sketch, an application form cannot be processed)

A large, empty rectangular box with a thin black border, intended for a sketch. It occupies most of the page below the instruction.

32. AFFIDAVIT OR SWORN DECLARATION

I/We _____ of the _____

of _____ in the _____ of _____

Solemnly declare that:

All the above statements and the statements contained in all of the exhibits transmitted herewithin are true, and I/We 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.

DECLARED before me at the _____ of _____

in the _____ of _____ this _____

day of _____ 20_____.

A Commissioner etc.

Signature of Applicant, Solicitor,
Authorized Agent

A Commissioner etc.

Signature of Applicant, Solicitor,
Authorized Agent

33. AUTHORIZATION

Consent of the owner(s) to the use and disclosure of personal information

I/We _____ am/are the owner(s) of the land that is the subject of this application for a Zoning By-law Amendment for the purposes of the Freedom of Information and Privacy Act I/We 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 sole purposes of processing this application.

Date

Signature of Owner

Date

Signature of Owner

34. AUTHORIZATION OF OWNER FOR AGENT TO MAKE THE APPLICATION AND TO PROVIDE PERSONAL INFORMATION:

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/We _____ am/are the owner(s) of the land that is the subject of this application for a Zoning By-law Amendment and I/We authorize _____ to make this application on my/our behalf, and for the purposes of the Freedom of Information and Protection of Privacy Act to provide any of my personal information that will be included in this application or collected during the processing of this application.

Date

Signature of Owner

Date

Signature of Owner

35. CONSENT OF OWNER – SITE INSPECTION

I/We _____ am/are the owner(s) of the land that is the subject of this application for a Zoning By-law Amendment and I/We authorize Municipal Staff, Committee Members, and Council members to enter onto the property to gather information necessary (e.g. site inspection, photos, video etc.) for assessing this application.

Date

Signature of Owner

Date

Signature of Owner

For Office Use Only:

Date Complete application was received: _____

File No. _____

Date Stamp: