



ZONING BY-LAW AMENDMENT & HOLDING BY-LAW

THE UNDERSIGNED HEREBY APPLIES TO THE CORPORATION OF THE TOWNSHIP OF NORTH STORMONT UNDER SECTIONS 34 OR 36 OF THE PLANNING ACT, R.S.O. 1990, AS AMENDED, FOR AN AMENDMENT TO BY-LAW 08-2014, AS DESCRIBED IN THIS APPLICATION.

APPLICANT INFORMATION

Name of Applicant: _____

Mailing Address: _____
(Street Address) (Town) (Province) (Postal Code)

Phone Number: _____
(Home) (Work) (Fax)

Email Address: _____

NAMES AND ADDRESSES OF HOLDERS OF ANY MORTGAGES, CHARGES OR OTHER ENCUMBRANCES

Name of Applicant: _____

Mailing Address: _____
(Street Address) (Town) (Province) (Postal Code)

Phone Number: _____
(Home) (Work) (Fax)

Email Address: _____

PROPERTY INFORMATION

Municipal Address: _____

Legal Description: Lot _____ Concession _____
Part _____ Plan No. _____

Lot Size: Frontage: _____ Depth: _____ Area: _____



UNITED COUNTIES OFFICIAL PLAN CONSIDERATIONS

1. If the application is to implement an alteration to the boundary of an area of settlement or to implement a new area of settlement, provide details of the Official Plan or Official Plan Amendment that deals with the matter.
2. If the application is to remove land from an area of employment, provide details of the Official Plan or Official Plan Amendment that deals with the matter.
3. If the subject land is within an area where zoning with conditions may apply, provide an explanation of how the application conforms to the Official Plan policies relating to zoning with conditions.

PLANNING INFORMATION

4. Current (United Counties) Official Plan designation and provide an explanation of how this application conforms to the Official Plan:

5. Current Zoning of the Subject Land: _____

6. What is the nature and extent of the rezoning requested?

7. Why is the Rezoning being requested?

8. Is the subject property located within a Well Head Protection Area (WHPA) as indicated within the Source Water Protection Plan (please visit www.yourdrinkingwater.ca for further information)?



PLANNING INFORMATION CONTINUED

9. If the subject land is within an area where the Township of North Stormont has pre-determined the minimum and maximum density requirements or the minimum and maximum height requirements, attach a statement of these requirements.

10. Is the access to the subject land by way of a County Road, Municipal Road that is maintained all year or seasonally, by another public road, by a right of way or by water?

11. If access to the subject land is by water only, provide the parking and docking facilities used or to be used and the approximate distance of these facilities from the subject land and the nearest public road.

12. What is the existing use(s) of the subject land?

13. What is the proposed use of the subject land?

14. Are there any existing buildings or structures on the subject land? Yes No

(If the answer is yes, for each building or structure, what is the type of building or structure, the setback in metres from front lot line, rear lot line and side lot lines, the height of each building or structure and the dimensions or floor area of each building or structure?)



PLANNING INFORMATION CONTINUED

15. Are any buildings or structures proposed to be built on the subject land? Yes No

(If the answer is yes, for each building or structure, what is the type of each building or structure, the setback in metres from the front lot line, rear lot line and side lot lines, the height of each building or structure and the dimensions or floor area of each building or structure?)

16. What date was the subject land acquired by the current owner?

17. What date were the existing buildings or structures erected on the subject land?

Buildings:

Structures:

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18. What is the length of time that the existing uses have continued on the subject land?

19. Is water provided to the subject land by a publically owned and operated piped water system, a privately owned and operated individual or communal well, a lake or other water body or other means?

20. Is sewage disposal provided to the subject land by a publicly owned and operated sanitary sewage system, a privately owned and operated individual or communal septic system, a privy or other means?



PLANNING INFORMATION CONTINUED

21. If the application would permit development on privately owned and operated individual or communal septic systems, and more than 4500 litres of effluent would be produced per day as a result of the develop being completed, attached the following:

- (a) A servicing options report; and
- (b) A hydrogeological report.

22. Is storm drainage provided by sewers, ditches, swales or other means?

23. If known, is the subject land the subject of an application under the Planning Act for approval of a plan of subdivision or a consent? Yes No

(If the answer is yes, and if known, what is the file number of the application and the status of the application?)

24. If known, has the subject land ever been the subject of an application under Section 34 (Zoning Amendment) of the Planning Act? Yes No

(If the answer is yes, what was the date, the by-law number and/or the purpose of the application?)

Date: _____ By-law Number: _____

Purpose: _____

25. Provide details on how the application for an amendment to the Zoning By-law is consistent with Policy Statements issued under Subsection 3(1) of the Planning Act:



SKETCH REQUIREMENTS

A sketch must be attached to this application showing the following (in metric units):

- i) The boundaries and dimensions of the subject land.
- ii) 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 the side yard lot lines.
- iii) 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 of features include buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetland, wooded area, wells and septic tanks.*
- iv) The current uses on land that is adjacent to the subject land (neighbouring land uses).
- v) The location, width and name of any roads 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.
- vi) If access to the subject land is by water only, the location of the parking and docking facilities to be used.
- vii) The location and nature of any easement affecting the subject land.

SWORN DECLARATION

I/We, _____ of the _____

Of _____ in the District of/ Municipality of/ County of _____

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

SWORN/DECLARED AT _____)

In the _____)

This _____ day of _____ 20____)

_____)

A Commissioner of oaths, etc.

_____)

Applicants



UNDERTAKING FOR ONTARIO MUNICIPAL BOARD APPEAL

TO: Township of North Stormont

FROM: Name: _____

Address: _____

SUBJECT: APPLICATION FOR A ZONING BY-LAW AMENDMENT

Address of Site: _____

Where the Township of North Stormont substantially supports the application for Zoning By-law Amendment,

Name of Applicant: _____

Hereby undertakes to pay, in accordance with Section 3 of Schedule A of By-law 01-2015 of the Township of North Stormont, upon receipt of invoice from the Township, any and all legal costs, including all disbursements of the Township in respect of preparation for and attendance at an Ontario Municipal Board hearing, until the matter is finally resolved by the said Board.

It is hereby acknowledged that "hearing" shall include all attendances before the Board in respect of the said application whether in person, telephone conference call or other means as directed by the Board.

Dated this _____ day of _____, 20__.

Please complete 1 or 2.

1.

Signature of Applicant

Please Print Name

Signature of Witness

Please Print Name

2.

Corporate name (if applicable)

(Authorized Signature) I have the authority to bind the Corporation

(Please print Name and Title)