



# The Corporation of the Township of NORTH STORMONT

P.O. Box 99  
15 Union Street  
Berwick, ON  
K0C 1G0

## APPLICATION FOR A MINOR VARIANCE

THE UNDERSIGNED HEREBY APPLIES TO THE COMMITTEE OF ADJUSTMENT FOR THE CORPORATION OF THE TOWNSHIP OF NORTH STORMONT UNDER SECTION 45 OF THE PLANNING ACT, R.S.O. 1990, AS AMENDED, FOR RELIEF AS DESCRIBED IN THIS APPLICATION, FROM BY-LAW NO. 08-2014 AS AMENDED.

**MINOR VARIANCE – S. 45(1)**

**PERMISSION – S. 45(2)**

### APPLICANT INFORMATION

**Name of Applicant:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
(Street Address) \_\_\_\_\_ (Town) \_\_\_\_\_ (Province) \_\_\_\_\_ (Postal Code) \_\_\_\_\_

**Phone Number:** \_\_\_\_\_  
(Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Fax) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Name of Agent (if applicant is not the registered owner):** \_\_\_\_\_

**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:** \_\_\_\_\_



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## PLANNING INFORMATION

4. Current Official Plan designation: \_\_\_\_\_

5. Current Zoning of the Subject Land: \_\_\_\_\_

6. What is the nature and extent of relief from the Zoning By-law?

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7. For What Reason (why) is the minor variance requested?

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8. Is the access to the subject land by a Provincial Highway, by a municipal road that is maintained all year or seasonally, by another public road, by a right of way or by water?

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

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

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11. 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](http://www.yourdrinkingwater.ca) for further information)?

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## **PLANNING INFORMATION CONTINUED**

12. 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?)

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13. 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 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?)

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

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

Buildings:

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Structures:

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## PLANNING INFORMATION CONTINUED

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

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17. 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?

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18. 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?

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

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20. If known, is the subject land ever been the subject of an application under Section 45 (Minor Variance) of the Act?    Yes    No

(If the answer is yes, what was the date, the file number and the purpose of the application?)

Date: \_\_\_\_\_ File No.: \_\_\_\_\_

Purpose: \_\_\_\_\_

21. 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?)

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## 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/DECLARE AT** \_\_\_\_\_)

In the \_\_\_\_\_)

This \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_)

\_\_\_\_\_  
A Commissioner of oaths, etc.

\_\_\_\_\_  
Applicants



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**IF THE OWNER IS NOT THE APPLICANT, THE OWNER MUST COMPLETE THE FOLLOWING:**

I/We, \_\_\_\_\_ of the \_\_\_\_\_

Of \_\_\_\_\_ in the District of/ Municipality of/ County of \_\_\_\_\_

Solemnly declare that \_\_\_\_\_ is authorized to submit this application and that to my knowledge, all of the statements contained in the application and all the supporting documents are true, and I make this solemn application 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.

Owners

**PLEASE NOTE THAT:**

- Unless otherwise requested, all information will be sent to the agent, if any.
- If jointly owned, both owners must apply and sign.
- The fees are payable in cash or by cheque, payable to the TOWNSHIP OF NORTH STORMONT and must be presented with this application.
- If you have any questions, you can call the Planning Department at 613-984-2821 ext. 226.



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## UNDERTAKING FOR ONTARIO MUNICIPAL BOARD APPEAL

**TO:** Township of North Stormont

**FROM:** Name: \_\_\_\_\_

Address: \_\_\_\_\_

## SUBJECT: APPLICATION FOR A MINOR VARIANCE

Address of Site: \_\_\_\_\_

Where the Committee of Adjustment of the Township of North Stormont substantially supports the application for a Minor Variance,

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.

2.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Corporate name (if applicable)

\_\_\_\_\_  
Please Print Name

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

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
(Please print Name and Title)

\_\_\_\_\_  
Please Print Name