



CORPORATION OF THE TOWN OF DESERONTO
331 MAIN ST. PO BOX 310, DESERONTO, ON K0K 1X0
PH. 613-396-2440 FAX 613-396-3141
info@deseronto.ca www.deseronto.ca

APPLICATION FOR

File No.

MINOR VARIANCE - s.45 (1) **PERMIT - s.45 (2)**

It is required this application be accompanied by a fee of \$ **300.00** made payable to the Town of Deseronto

PLANS REQUIRED
IT WILL BE NECESSARY TO SUBMIT PRELIMINARY SITE PLANS
FOR THE DEVELOPMENT AT THE TIME OF THE FILING OF THIS APPLICATION

A site plan illustration is required. Please indicate the scale being used, identify the north arrow and identify the units being used to describe dimensions, whether metric or imperial units. The site plans should indicate the following:

1. The boundaries and dimensions of the subject land.
2. The location, size and type of all the 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.
3. 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, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells and septic tanks.
4. The current uses on land that is adjacent to the subject land.
5. 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 right-of-way.
6. If access to the subject land is by water only, the location of the parking and docking facilities to be used.
7. The location and nature of any easement affecting the subject land.

The undersigned hereby applies to the Committee of Adjustment for the _____

_____ under section 45
(name of municipality)

of the Planning Act for relief, as described in this application, from By-Law No. _____ (as amended).

Applicant - Applicant is: Owner or Authorized Agent of Owner

| | |
|---------------|--|
| Name of Owner | Name of Agent (if the applicant is an authorized agent of owner) |
| Address | Address |
| | |
| Telephone | Telephone |
| Email | Email |

Official Plan – current designation of the subject land:

| |
|--|
| |
| |
| |

Zoning By-Law – current zoning of the subject land:

| |
|--|
| |
| |
| |

Relief – nature and extent of the relief from the zoning by-law:

| |
|--|
| |
| |
| |

Reason – why the proposed use cannot comply with the provisions of the zoning by-law:

| |
|--|
| |
| |
| |

Legal Description – of the subject land:

| | | |
|-------------------|-----------------|---------------------|
| Lot | Concession | Geographic Township |
| Registered Plan | Lot/Block | Reference Plan |
| Municipal Address | Assessment Roll | |
| Lot Area | Frontage | Depth |

Describe any easements, rights of way or restrictions applicable to the subject land(s)

Access – access to the subject land will be by:

| | | |
|--|--|--|
| <input type="checkbox"/> Provincial Highway | <input type="checkbox"/> Municipal Road – year round | <input type="checkbox"/> Other public road (specify) |
| <input type="checkbox"/> Municipal road – seasonal | <input type="checkbox"/> Right-of-way | <input type="checkbox"/> Water |

| | | |
|---|---|--|
| WATER ACCESS – Where access to the subject land is by water only: | | |
| Docking facilities (specify) _____ Distance from subject land _____ Distance from nearest public road _____ | Parking facilities (specify) _____ Distance from subject land _____ Distance from nearest public road _____ | |
| Existing Uses – of the subject land: | Length of Time – the existing uses of the subject land have continued: | |
| | | |
| | | |
| EXISTING BUILDINGS – STRUCTURES – Where there are any building or structures on the subject land, indicate for each: | | |
| TYPE _____ | Front lot line setback: _____ | Height in metres: _____ |
| IF KNOWN, | Rear lot line setback: _____ | Dimensions: _____ |
| DATE CONSTRUCTED _____ | Side lot line setback: _____ | Floor area: _____ |
| | Side lot line setback: _____ | |
| TYPE _____ | Front lot line setback: _____ | Height in metres: _____ |
| IF KNOWN, | Rear lot line setback: _____ | Dimensions: _____ |
| DATE CONSTRUCTED _____ | Side lot line setback: _____ | Floor area: _____ |
| | Side lot line setback: _____ | <i>attach additional page if necessary</i> |
| Proposed Uses – of the subject land: | | |
| | | |
| | | |
| PROPOSED BUILDINGS – STRUCTURES – Where any buildings or structures are proposed to be built on subject land, indicate for each: | | |
| TYPE _____ | Front lot line setback: _____ | Height in metres: _____ |
| IF KNOWN, | Rear lot line setback: _____ | Dimensions: _____ |
| DATE CONSTRUCTED _____ | Side lot line setback: _____ | Floor area: _____ |
| | Side lot line setback: _____ | |
| TYPE _____ | Rear lot line setback: _____ | Dimensions: _____ |
| IF KNOWN, | Side lot line setback: _____ | Floor area: _____ |
| DATE CONSTRUCTED _____ | Side lot line setback: _____ | <i>attach additional page if necessary</i> |
| DATE – subject land was acquired by current owner on: _____ | | |
| Services | | |
| WATER is provided to the subject land by: | | |
| <input type="checkbox"/> Publicly-owned/operated piped water system | <input type="checkbox"/> Lake or other water body | |
| <input type="checkbox"/> Privately-owned/operated individual well | <input type="checkbox"/> Other means (specify) | |
| <input type="checkbox"/> Privately-owned/operated communal well | | |

| | |
|---|--|
| SEWAGE DISPOSAL is provided to the subject land by: | |
| <input type="checkbox"/> Publicly-owned/operated sanitary sewage system | <input type="checkbox"/> Privy |
| <input type="checkbox"/> Privately-owned/operated individual/communal septic system | <input type="checkbox"/> Other means (specify) |

STORM DRAINAGE is provided to the subject land by:

Sewers Sewers Sewers Sewers

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 development being completed, please attach:

1. A calculation of the "Sewage System Design Flows" as per the Building Code Act.
2. a servicing option report; and
3. a hydrogeological report

Other Applications – If known, indicate if the subject land is the subject of an application under the Planning Act:

| | | |
|---|--------|--------|
| <input type="checkbox"/> approval of a plan of subdivision (under section 51) | File # | Status |
| <input type="checkbox"/> consent (under section 53) | File # | Status |
| <input type="checkbox"/> Previous application (under section 34) | File # | Status |

AUTHORIZATION BY OWNER

I, the undersigned, being the owner of the subject land, hereby authorize _____ to be the applicant in the submission of this application.

Signature of applicant

Signature of witness

Date

DECLARATION OF APPLICANT

I/we, _____ of the _____ in the _____

solemnly declare that:

All the statements contained in this application and provided by me are 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. I/we further declare that this application provides permissions to the approval authority to conduct site inspections during normal business hours for the purposes of this application.

DECLARED before me at the _____

In the _____

this _____ day of _____, 20____.

Signature of commissioner, etc.

Signature of applicant

FOR OFFICE USE ONLY

Name of Owner: _____ Address: _____

Name of Agent: _____ Address: _____

Date of Receipt of Completed Application: _____ Checked by: _____

Zoning By-law #: _____ Passed: _____

As amended by zoning by-law #: _____ Passed: _____

And by-law #: _____ Passed: _____

Sections: _____ Zone: _____

Official Plan Designation: _____

Agricultural land use classification in Canada: Land Inventory _____

Site visit carried out by staff or committee member: Yes ___ No ___

Authorization or owner received (if required): Yes ___ No ___

Conformity with agricultural code of practice (if applicable): Yes ___ No ___

Committee File #: _____

Committee submission #: _____

Hearing Date: _____

Adjourned Hearing Date: _____

General comments: _____