



Application for Consent

Under Section 53 of the Planning Act

Note to Applicants: In this form the term "subject" land means the land to be severed and the land to be retained.

Property Roll Number _____

Application received _____

Completeness of the Application

The information in this form **must** be provided by the applicant with the appropriate fee. If the information and fee are not provided, the application will be returned or refused for further consideration until the information and fee have been provided.

The application form also sets out other information that will assist the Township and others in their planning evaluation of the consent application. To ensure the quickest and most complete review, this information should be submitted at the time of application. In the absence of this information, it may not be possible to do a complete review within the legislated time frame for making a decision. As a result, the application may be refused.

Section 1), Sworn Affidavit, must be signed by all owners in front of a commissioner, or Sections 11.2 and 11.3 must be completed by the property owner if an agent is making this application on their behalf.

Please Print and Complete or (✓) Appropriate Box(es)

| | | | |
|---|---|--------------------|------------------------|
| 1. Applicant and Ownership Information | | | |
| 1.1 | Name of Applicant | Home Telephone No. | Business Telephone No. |
| | Address | | Postal Code |
| | Email | | |
| 1.2 | Name of Owner(s) If different from the applicant an owner's authorization is required in Section 11, if the applicant is not the owner. | | |
| | Address | Home Telephone No. | Business Telephone No. |
| 1.3 | Any Mortgages, Charges, or other encumbrances in respect of the subject land: | | |
| | Name | Address | |
| | Name | Address | |

Submission of the Application

- One application form is required for each parcel to be severed.
- **Application Fee \$500.00 Deposit \$1000.00**
- 1 copy of the completed application form and 1 copy of the sketch are required by the Township.
- Measurements are to be in metric units.

For Help

If you have any questions please contact the Municipal Office:

Township of East Garafraxa
RR # 3,
Orton, Ontario L0N 1N0
Telephone (519) 941-1007
Fax (519) 941-1802

2. Location of the Subject Land

| | | | |
|-----------------------------|---|---------------------|----------------------|
| 2.1 County: Dufferin | Municipality Township of East Garafraxa | | |
| Concession Number | Lot Number(s) | Reference Plan No. | Part Number (s) |
| Registered Plan No. | Lot(s) /Block(s) | Name of Street/Road | Street/Emergency No. |
| Width of street/road _____m | <input type="checkbox"/> Municipal year round maintained road <input type="checkbox"/> County Road <input type="checkbox"/> Seasonal or private road | | |

2.2 Are there any easements or restrictive covenants affecting the subject land?
 No Yes If Yes, describe the easement or covenant and its effect

3. Purpose of this Application

3.1 Proposed transaction (check appropriate box)

Transfer Creation of a new lot Addition to a lot An easement Other purpose
 A charge A lease A correction of title

3.2 Specify Purpose, ie. retirement lot, farm severance, lot addition . .

3.3 Name of person(s) to whom land or interest in land is to be transferred, leased or charged.

4. Description of Subject Land and Servicing Information

| 4.1 Description | Frontage (m) | Severed | Retained |
|-----------------|--------------|---------|----------|
| | Depth (m) | | |
| | Area (m) | | |

5. Land Use

5.1 Date property acquired Unknown

| | |
|------------------|------------------|
| 5.2 Existing Use | 5.3 Proposed Use |
|------------------|------------------|

5.4 Existing and Proposed buildings and structures (complete chart for each existing and proposed building or structure)

| Type of building or structure | Setbacks (m) | | | | Height (m) | Dimensions (m x m) | Area (m2) | Date of Construction or proposed construction | Time use has continued (for existing buildings and structures) |
|--|--------------|------|------|------|------------|--------------------|-----------|---|--|
| | Front | Rear | Side | Side | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |
| <input type="checkbox"/> Existing <input type="checkbox"/> Proposed | | | | | | | | | |

5.5 Environmental

| | | | | |
|--|--|--|---|---|
| <p>Water</p> <input type="checkbox"/> Private Well <input type="checkbox"/> Communal Well <input type="checkbox"/> Municipal Well <input type="checkbox"/> Other _____ | <p>Sewage Disposal</p> <input type="checkbox"/> Private Septic <input type="checkbox"/> Communal System <input type="checkbox"/> Other: _____ | <p>Storm Drainage</p> <input type="checkbox"/> Sewer <input type="checkbox"/> Ditches <input type="checkbox"/> Swales <input type="checkbox"/> Others: _____ | <p>Tile Drainage</p> <input type="checkbox"/> no <input type="checkbox"/> yes, please mark on site plan location of tile runs | <p>Biosolids</p> <input type="checkbox"/> no <input type="checkbox"/> yes, please mark on site plan location and timing of applications |
|--|--|--|---|---|

Assessment from the County of Dufferin Building Department regarding lot suitability to support an onsite sewage system submitted with the application would facilitate the review.

| | | | |
|---|---|--|---------------------------------|
| 6.7 Agriculture | | | |
| Are lands part of Nutrient Management Plan? <input type="checkbox"/> no <input type="checkbox"/> yes, please provide plan number _____ and date approved by OMAFRA _____ | | | |
| Are there any livestock facilities within 500 metres of the subject lands? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, complete the following for each farm operation: | | | |
| Animal type | Barn dimensions of all barns capable of housing livestock | Number of tillable hectares of farm land | Type of Manure storage |
| Animal type | Barn dimensions of all barns capable of housing livestock | Number of tillable hectares of farm land | Type of Manure storage |
| 6.8 Statement of Requirements: Please complete the following chart | | | Zone Requirements: (Office Use) |
| | Severed | Retained | |
| Lot Area (hectares) | | | |
| Frontage (m) | | | |
| Front Yard (distance between front lot line and building or structure) (m) | | | |
| Rear Yard (m) | | | |
| Interior Side Yard (m) | | | |
| Exterior Side Yard (m) | | | |
| Height (m) | | | |
| Lot Coverage (building footprint as % lot area) | | | |
| Dwelling Size (m ²) | | | |
| Landscaping (% of lot area) | | | |

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| 7 Consistency with Policy Documents |
| 7.1 Does this application Alter the boundary of a settlement area? <input type="checkbox"/> yes <input type="checkbox"/> no Create a new settlement area? <input type="checkbox"/> yes <input type="checkbox"/> no |

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| Remove lands from an employment area? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, provide details of any Official Plan or Official Plan Amendment | |
| 7.2 Are the subject lands in an area where conditional zoning may apply? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, provide details of how this application conforms to Official Plan conditional zoning policies. | |
| 7.3 Is the proposed application consistent with the Provincial Policy Statement and any other Policy Statements issued under subsection 3(1) of the Planning Act: <input type="checkbox"/> yes <input type="checkbox"/> no <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; border-bottom: 1px solid black; padding-bottom: 5px;"> Name of individual having knowledge of the policy statements. A report may be required to accompany this application and support the above statement of consistency. </div> <div style="width: 45%; border-bottom: 1px solid black; padding-bottom: 5px;"> Signature </div> </div> | |
| 7.4 Are the subject lands within the Greenbelt Plan area <input type="checkbox"/> yes <input type="checkbox"/> no | 4.5 Are the subject lands within the Greater Golden Horseshoe Growth Plan area <input type="checkbox"/> yes <input type="checkbox"/> no |
| 7.5 Does the proposed application conform to or does not conflict with the Provincial Plans, including the Greenbelt Plan and Growth Plan: <input type="checkbox"/> yes <input type="checkbox"/> no <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; border-bottom: 1px solid black; padding-bottom: 5px;"> Name of individual having knowledge of the plans A report may be required to accompany this application and support the above statement of consistency. </div> <div style="width: 45%; border-bottom: 1px solid black; padding-bottom: 5px;"> Signature </div> </div> | |

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| 8. History of the Subject Land |
| 8.1 Has the subject land ever been the subject of an application for approval of a plan of subdivision or consent under the Planning Act? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If Yes and if known, provide the file number and the decision made on the application. |
| 8.2 If this application is a re-submission of a previous consent application, describe how it has been changed from the original application. |
| 8.3 Has any land been severed from the parcel originally acquired by the owner of the subject land? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide for each parcel severed, the date of transfer, the name of transferee and the land use. |

8.4 Has any land been severed from the original, 40 Hectare (approx.) parcel.

Yes No If yes, provide details.

9. Other Information

9.1 Any other information that may be useful to the Council or other agencies in reviewing this application, ie. health department, conservation authorities, etc.

10. Sketch →(Please Use Metric Units)

10.1 The application shall be accompanied by a sketch showing the following:

- the boundaries and dimensions of the subject land, the part that is to be severed and the part that is to be retained
- the boundaries and dimensions of any land owned by the owner of the subject land and that abuts the subject land
- the distance between the subject land and the nearest township lot line or landmark, such as a railway crossing or bridge
- the location of all land previously severed from the original approximate 40 Hectare parcel
- the approximate location of all natural and artificial features on the subject land and adjacent lands that in the opinion of the applicant may affect the application, such as buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells and septic tanks
- the existing uses(s) on adjacent lands
- 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
- the location and nature of any easement affect the subject land

11 Affidavit, Sworn Declaration and Authorizations

11.1 Affidavit or Sworn Declaration.
I, _____ of the _____
in the _____ 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.
Sworn (or declared) before me
at the _____
in the _____
this _____ day of _____ Applicant

Commissioner of Oaths Applicant

11.2 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, _____, am the owner of the land that is the subject of this application and I authorize _____ to make this application on my behalf.

Date Signature of Owner

11.3 If the applicant is not the owner of the land that is the subject of this application, complete the authorization of the owner concerning personal information set out below.

I, _____, am the owner of the land that is the subject of this application and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I authorize _____, as my agent for this application, to provide any of my personal information that will be included in this application or collected during the processing of the application.

Date Signature of Owner

11.4 Permission to Enter

I _____ am the owner of the land that is the subject of this application and I authorize Township staff or their representative to enter my property for the purposes of evaluating this application.

Date Signature of Owner

12. Consent of the Owner

12.1 Complete the consent of the owner concerning personal information set out below.

Consent of the Owner to the Use and Disclosure of Personal Information

I, _____, am the owner of land that is the subject of this application and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I 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 purposes of processing this application.

Date Signature of Owner