



Haldimand
County

Application for Site Plan Approval

Note:

This application must be typed or printed in ink and completed in full.
An incomplete or improperly prepared application may not be accepted and could result in processing delays.

For Office Use Only

File No. PLSPHA _____
Related File No. _____
Roll No. _____
Date Submitted _____
Date Received _____
Sign Issued _____
Planner's Initials _____

A. APPLICANT INFORMATION

1. Owner (s) _____ Phone No. _____
 Address _____ Fax No. _____
 _____ Postal Code _____
 _____ E-Mail _____

2. Agent _____ Phone No. _____
 Address _____ Fax No. _____
 _____ Postal Code _____
 _____ E-Mail _____

Please specify to whom all communications should be sent: Owner Agent

B. LOCATION/LEGAL DESCRIPTION OF PROPERTY

Geographic Township _____ Urban Area/Hamlet _____
 Concession Number _____ Lot Number _____
 Registered Plan Number _____ Lot(s) Block(s) _____
 Reference Plan Number _____ Part Numbers _____
 Property Address _____



C. PURPOSE OF APPLICATION

1. Please explain what you propose to do on the land/premises:

<i>Site Information</i>		
	<i>Existing</i>	<i>Proposed</i>
Zoning		
Lot Frontage (metres)		
Lot Depth (metres)		
Lot Width (metres)		
Lot Area (square metres)		
Lot Coverage (%)		
Front Yard (metres)		
Rear Yard (metres)		
Interior Side Yard (Left) (metres)		
Interior Side Yard (Right) (metres)		
Exterior Side Yard (Corner lot) (metres)		
Landscaped Open Space (%)		
Access Width (Entrance & exit) (metres)		
Type & size of fencing or screening		



Building Size		
	<i>Existing</i>	<i>Proposed</i>
Number of Storeys		
Building Height (metres)		
Total Ground Floor Area (square metres)		
Total Gross Floor Area (square metres)		
Total Useable Floor Area (square metres)		

Off-Street Parking & Loading Facilities		
	<i>Existing</i>	<i>Proposed</i>
Number of Off-street parking spaces		
Number of Visitor Parking spaces		
Number of Parking Spaces for Disabled Persons		
Number of Off-street loading facilities		

2. *Multiple Residential Uses (If applicable):*

i. Number of buildings proposed _____

ii. Total number of visitor parking spaces _____

iii. Playground Area (%) _____

iv. Conversion or addition to existing building? Yes No

If yes, please describe _____



Haldimand County

<i>Type</i>	<i>Number of Units</i>	<i>Floor Area Per Unit (sq. m.)</i>
Bachelor		
One Bedroom		
Two Bedroom		
Three Bedroom		
Group Townhouse		
Street Townhouse		
Other facilities provided (e.g. play facilities, underground parking, games room, swimming pool, etc.)		
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3. Commercial/Industrial Uses (If Applicable):

i. Number of EXISTING buildings _____

ii. Number of PROPOSED buildings _____

iii. Conversion or addition to EXISTING buildings? Yes No

If yes, describe the proposed change(s) _____

iv. Gross floor area by type of use (e.g. office, retail, storage, etc.) in square metres:



- v. Seating capacity (for assembly halls, etc.) _____
- vi. Total number of fixed seats _____
- vii. Describe the type of business(es) proposed _____
- viii. Total number of staff proposed a) Initially _____ b) In 5 years _____
- ix. Maximum number of staff on the largest shift _____
- x. Open storage required? Yes No
- xi. If residential use proposed as part of, or accessory to commercial/industrial use, describe:

4. Institutional Uses (If applicable):

- i. Describe the type of use proposed _____
- ii. Seating capacity (if applicable) _____
- iii. Number of beds (if applicable) _____
- iv. Total number of staff proposed a) Initially _____ b) In 5 years _____
- v. Maximum number of staff on the largest shift _____
- vi. Gross floor area by type of use (e.g. office, services, storage, etc.)

5. Recreational or Other Uses:

Describe the use(s) _____



D. SUPPORTING MATERIAL TO BE SUBMITTED WITH THE APPLICATION

In order for your application to be considered complete, the following must be included as part of this application (***all figures must be provided in bold numerals, black ink, and metric units***):

1. Site Plan. The minimum requirements for acceptance of a site plan application are as follows:

<input type="checkbox"/>	Twelve (12) complete sets of site plan drawings FOLDED to 215 mm x 275 mm (8 ½" x 11")
<input type="checkbox"/>	Key plan
<input type="checkbox"/>	Agent's or applicant's name, address, telephone, fax number and e-mail address
<input type="checkbox"/>	Project name, drawing date and revision number
<input type="checkbox"/>	Municipal address and legal description
<input type="checkbox"/>	Scale and north arrow
<input type="checkbox"/>	All dimensions of the property
<input type="checkbox"/>	Dimensions of all buildings and structures
<input type="checkbox"/>	All building setbacks (in metres)
<input type="checkbox"/>	Names of adjacent streets
<input type="checkbox"/>	Vehicular entrances (widths and radii)
<input type="checkbox"/>	Location, dimensions, number of parking spaces (including visitor and disabled) and aisles
<input type="checkbox"/>	Refuse disposal and storage areas including any related screening
<input type="checkbox"/>	Location of winter snow storage
<input type="checkbox"/>	Landscape areas with dimensions
<input type="checkbox"/>	Size, type and location of all signs, fencing, screening, buffering and lighting
<input type="checkbox"/>	Building entrances and grades
<input type="checkbox"/>	Existing and proposed easements
<input type="checkbox"/>	All hard surface materials



<input type="checkbox"/>	The location, size and distances to buildings and property lines of any existing sewage system treatment units (septic tanks) and distribution piping (septic beds) on the subject lands
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2. Application fee (see Fee Schedule at page 10).
3. Conservation Authority fee, if applicable (Information available from staff. Conservation Authority fee schedules are also available at these websites: Niagara Peninsula Conservation Authority: www.conservation-niagara.on.ca; Grand River Conservation Authority: www.grandriver.ca; and Long Point Region Conservation Authority: www.lprca.on.ca).
4. Any other information required pre-consultation meeting or staff.
5. In addition to the above, the following information may also be required prior to site plan approval:
 - i. Site and building statistics schedule – this schedule includes, but is not limited to the following:
 - a) Lot coverage percentage
 - b) Floor area ratio
 - c) Gross, ground and useable floor area
 - d) Parking space totals – required and provided
 - ii. Existing and proposed grades around perimeter and within site (3 copies)
 - iii. Stormwater management plans prepared by a qualified consultant (3 copies)
 - iv. Site servicing plans (3 copies)
 - v. Elevations of proposed buildings
 - vi. Professional stamp

Note: In case other documentation/supporting material become necessary, you will be asked to submit that prior to processing of your application.

E. SITE PLAN AGREEMENTS

Site plan agreements may be required for some developments prior to site plan approval. Should this be necessary for this development, an additional fee will be required for the preparation, administration and registration of agreements.



F. FREEDOM OF INFORMATION

For the purposes of the Freedom of Information and *Freedom of Information and Protection of Privacy Act*, I authorize and consent to use by or disclosure to any person or public body of any information that is collected under the authority of the *Planning Act* or any supporting information/consultant studies submitted for the purposes of processing of this application.

Owner/Applicant/Agent Signature(s) Date

G. DECLARATION

I/we _____ of _____ solemnly declare that:

all of the above statements and the statements contained in all of the exhibits transmitted herewith 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.

Declared before me in

**TO BE SIGNED IN THE PRESENCE OF A
COMMISSIONER FOR TAKING AFFIDAVITS**

in _____
this _____ day of
_____ A.D., 20 _____

Owner/Applicant/Agent Signature (s)

A Commissioner, etc.



H. AUTHORIZATION

If the applicant is not the owner of the land that is the subject of this application, the authorization set out below must be completed by the owner.

AUTHORIZATION OF OWNER (S)

I/we _____ am/are the owner(s) of the land that is the subject of this zoning application.
I/we authorize _____ to make this application on my/our behalf and to provide any of my/our personal information necessary for the processing of this application.

Signature (s)

Date



Haldimand County

J. SUBMISSION OF COMPLETE APPLICATION/FOR MORE INFORMATION

For submitting a complete application, getting additional information or assistance in completing this application, please contact a Planner. In case reference to Haldimand County maps is required to complete the application, they are available at the County website: www.haldimandcounty.ca. Complete applications can be submitted at the following office Monday to Friday between 8:30 am and 4:30 pm:

Haldimand County
Planning and
Development Division
53 Thorburn Street South
Cayuga ON NOA 1E0
Phone: (905)-318-5932