

APPLICATION CHECKLIST

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**). An incomplete or improperly prepared application may not be accepted and could result in processing delays.

Please Note: All applications are to be submitted via Portal, through the County's website. Portal, along with further instructions can be found at the following link: <https://portal.haldimandcounty.on.ca/cityviewportal>

1. Supporting Sketch: a sketch (on plain 8.5 x 11 inch paper, no graph paper) drawn to scale showing the following must be included (A sample sketch is included for your convenience):

<input type="checkbox"/>	Boundaries and dimensions of the subject land including the part that is to be severed and the part that is to be retained.
<input type="checkbox"/>	Location, size, height and type of all existing and proposed buildings or structures on severed or retained lands, including the distance of the buildings or structures from front yard lot line, rear yard lot line and side yard lot lines.
<input type="checkbox"/>	Boundaries and dimensions of the land owned by the owner, including the subject land and adjacent land.
<input type="checkbox"/>	The distance between the subject land and the nearest municipal lot line or landmark, such as a railway crossing or bridge.
<input type="checkbox"/>	The location of all land previously severed from the parcel originally acquired by the current owner of the subject land.
<input type="checkbox"/>	The approximate location of all natural and artificial features on the subject land and adjacent lands, including railways, roads, watercourses, drainage ditches, irrigation ponds, river or stream banks, wetlands, wooded areas, buildings.
<input type="checkbox"/>	The current use(s) of the adjacent lands.
<input type="checkbox"/>	The location, width and name of any road within or abutting the subject land. Indicate whether the road is an unopened road allowance, a public travelled road, a private road or a right-of-way.
<input type="checkbox"/>	If access to the subject land is by water only, the location of the parking and docking facilities to be used.
<input type="checkbox"/>	The location and nature of any restrictive covenant or easement affecting the subject land.
<input type="checkbox"/>	If the severed parcel is to be conveyed to an abutting property owner, please identify the abutting property with name and instrument number exactly as now registered.
<input type="checkbox"/>	The location, size and distance to buildings and property lines of any existing sewage system treatment units (septic tanks) and distribution piping (septic beds) on the lot to be created and/or retained.



2. Form 1, if applicable.
3. Form 2, if applicable.
4. Form 3, if applicable.
5. Public Consultation Strategy – Standard Form or Complex Information/Commitment Form
6. Application fee (see Schedule of Fees below).
7. 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).

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

NOTIFICATION SIGN REQUIREMENTS

For the purpose of public notification and in order for staff to easily locate your land, you will be given a sign to indicate the intent and purpose of your application. It is your responsibility to:

- 1. Post sign as soon as you receive it.**
- 2. Post one sign per frontage in a visible location on the subject property.**
- 3. Ensure one sign is posted at the front of the property at least three feet above ground level.**
- 4. Notify the Secretary-Treasurer when the sign is in place in order to avoid processing delays.**
- 5. If the sign is not posted in accordance with the above, the Committee of Adjustment may choose to defer their decision.**
- 6. Maintain the sign until notice of decision is received and thereafter removed.**

For the purposes of this application, the Owner/Applicant/Agent grants permission to the relevant County staff to enter upon the said property for inspection purposes, and the owner will not be held responsible or liable if any accident or injury occurs.



SCHEDULE OF FEES

Notes:

1. Please make cheques for application fee payable to Haldimand County.
2. A separate cheque payable to the relevant Conservation Authority is also required for applications that fall within that Conservation Authority's watershed.
3. Fees are subject to change.
4. Additional fees may be applicable, please contact Planning Staff for further information.

<i>Fee Category</i>	<i>Fee (\$)</i>
A. Base Fee:	
i) Major application*	3,841.00
ii) Minor application**	2,657.00
B. Building Review Fee - Sewage System Assessment <i>(applies only to properties without municipal water/sewer)</i>	363.00
C. Applicant initiated changes to conditions after approval by C of A:	
i) additional engineering review required	168.00
ii) no recirculation required	530.00
iii) recirculation required	559.00
D. Conservation Authority Fee:	For lands located within Conservation Authorities' (Niagara Peninsula Conservation Authority, Grand River Conservation Authority, or Long Point Region Conservation Authority) watersheds, please contact planning staff, or refer to the Zoning By-law Interactive Map via the County's website.
E. Deed Stamping	358.00
F. Deferral – Applicant's request	309.00
G. Application Recirculation to agencies	182.00
H. Validation of Title	1,769.00
I. Additional Fees for legal costs:	
i) OLT Appeal	2,654.00
ii) Preparation of OLT Appeal Record	228.00

*Major Application: An application relating to circumstances that are complex and require extensive staff review (i.e. lot creation).

**Minor Application: An application relating to circumstances that are simple and require minimal staff review (i.e. Boundary adjustment, easements, certificate of cancellation).



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For Office Use Only

File No. **PLB-2024-** _____
Roll No. _____
Date Submitted _____
Date Received _____
Sign Issued _____
Pseudo Roll No. _____
Planner's Initials _____

Application for Consent/Land Severance

A. APPLICANT INFORMATION

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

2. Agent _____ Phone No. _____
Mailing 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 _____



2. Names and addresses of any mortgagees, holders of charges or other encumbrances:

3. Are there any easements or restrictive covenants affecting the property?

Yes No

If Yes, please describe the easement or covenant and its effect: _____

C. PURPOSE OF APPLICATION

1. Purpose: (Please check the appropriate box)

- | | |
|--|--|
| <input type="checkbox"/> Creation of a new lot | <input type="checkbox"/> A partial discharge of mortgage |
| <input type="checkbox"/> Surplus farm dwelling (Rural area) | <input type="checkbox"/> A lease |
| <input type="checkbox"/> Farm split (Rural area) | <input type="checkbox"/> A correction or validation of title |
| <input type="checkbox"/> Boundary adjustment | <input type="checkbox"/> An easement or right-of-way |
| <input type="checkbox"/> Cancellation of consent certificate | |

2. Please explain the purpose as indicated above in some detail:

3. Name of person(s), if known, to whom land or interest in land is to be transferred, leased or charged: _____

4. If a boundary adjustment, identify the Assessment Roll No. and property owner of the lands to which the parcel will be added. _____

5. If application involves a residential lot in the rural/agricultural area, please complete Form 1, available upon request.



6. If application proposes to divide a farm into two smaller agricultural parcels, please complete Form 2, available upon request.

7. Is there a time limit on this application? Yes No

If yes, please explain: _____

8. Are you requesting a certificate for the retained land in this application? Yes No

If yes, you must provide a lawyer's statement that there is no land abutting the subject land that is owned by the owner of the subject land other than land that could be conveyed without contravening Section 50 of the Planning Act.

D. PROPERTY DIMENSIONS, USE, ACCESS, SERVICING

1. Description of land intended to be SEVERED:

i) Dimensions of the subject lands in *metric units*:

<i>Frontage (m.)</i>	<i>Depth (m.)</i>	<i>Width (m.)</i>	<i>Area (ha.)</i>

ii) Existing Use: _____ Proposed Use: _____

iii) Number and type of EXISTING buildings and structures:

iv) Number and type of PROPOSED buildings and structures:

v) Existing or proposed access to the subject land:

<i>Existing/Proposed</i>	<i>Provincial Hwy</i>	<i>Municipal Road</i>	<i>Unopened Road</i>	<i>Other</i>
<i>Existing</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Proposed</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Please specify name of road/street: _____

vi) Servicing: Please indicate what services are AVAILABLE and/or PROPOSED:

<i>Water Supply</i>			<i>Sewage Treatment</i>			<i>Storm Drainage</i>		
<i>Type</i>	<i>Avail.</i>	<i>Prop.</i>	<i>Type</i>	<i>Avail.</i>	<i>Prop.</i>	<i>Type</i>	<i>Avail.</i>	<i>Prop.</i>
Municipal Water	<input type="checkbox"/>	<input type="checkbox"/>	Municipal Sewers	<input type="checkbox"/>	<input type="checkbox"/>	Storm Sewers	<input type="checkbox"/>	<input type="checkbox"/>
Communal System	<input type="checkbox"/>	<input type="checkbox"/>	Communal System	<input type="checkbox"/>	<input type="checkbox"/>	Open Ditches	<input type="checkbox"/>	<input type="checkbox"/>
Individual Wells	<input type="checkbox"/>	<input type="checkbox"/>	Septic Tank & Tile Bed	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>
Cistern	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>			
Unknown	<input type="checkbox"/>	<input type="checkbox"/>						

2. Description of land intended to be RETAINED:

i) Dimensions of the subject lands in *metric units*:

<i>Frontage (m.)</i>	<i>Depth (m.)</i>	<i>Width (m.)</i>	<i>Area (ha.)</i>

ii) Existing Use: _____ Proposed Use: _____

iii) Number and type of EXISTING buildings and structures:

iv) Number and type of PROPOSED buildings and structures:

v) Existing or proposed access to the subject land:



**Haldimand
County**

<i>Existing/Proposed</i>	<i>Provincial Hwy</i>	<i>Municipal Road</i>	<i>Unopened Road</i>	<i>Other</i>
<i>Existing</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Proposed</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please specify name of road/street: _____

vi) Servicing: Please indicate what services are AVAILABLE and/or PROPOSED:

<i>Water Supply</i>			<i>Sewage Treatment</i>			<i>Storm Drainage</i>		
<i>Type</i>	<i>Avail.</i>	<i>Prop.</i>	<i>Type</i>	<i>Avail.</i>	<i>Prop.</i>	<i>Type</i>	<i>Avail.</i>	<i>Prop.</i>
Municipal Water	<input type="checkbox"/>	<input type="checkbox"/>	Municipal Sewers	<input type="checkbox"/>	<input type="checkbox"/>	Storm Sewers	<input type="checkbox"/>	<input type="checkbox"/>
Communal System	<input type="checkbox"/>	<input type="checkbox"/>	Communal System	<input type="checkbox"/>	<input type="checkbox"/>	Open Ditches	<input type="checkbox"/>	<input type="checkbox"/>
Individual Wells	<input type="checkbox"/>	<input type="checkbox"/>	Septic Tank & Tile Bed	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>
Cistern	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>			
Unknown	<input type="checkbox"/>	<input type="checkbox"/>						

3. Have you consulted with Public Works Department concerning storm-water management?

Yes No

4. Does a legal and adequate outlet for storm drainage exist?

Yes No Unknown

5. Has the existing drainage on the subject land been altered?

Yes No Unknown

6. Have you consulted with Hydro One regarding any required setbacks?

Yes No Unknown



E. LAND USE

1. What is the existing official plan designation(s) of the subject land? _____

2. What is the existing zoning of the subject land? _____

(If required, assistance from Planning staff is available to answer questions 1 and 2 above).

F. PROVINCIAL POLICY

1. Is the proposal consistent with Provincial Policy Statements issued under Subsection 3(1) of the Planning Act, 1990, R.S.O. as amended?

Yes No

Please explain: _____

2. Is the subject land within an area of land designated under any provincial plan(s)?

Yes No

If yes, does the application conform to the applicable provincial plan(s)?

Yes No

Please explain: _____

3. Are any of the following uses or features located on the subject land or within 500 metres (1,640 feet) of the subject land? Where a greater distance is shown beside a Use or Feature in the following table, please apply the greater distance. Please check the appropriate boxes. (If required, assistance from Planning staff is available to answer these questions)

<i>Use or Feature</i>	<i>On the Subject Land</i>	<i>Within 500 metres (1,640') of subject land</i> <i>(Indicate distance)</i>
A livestock facility, manure storage, anaerobic digester, stockyard – located within 750 m (approx.. 2,500 ft)		
A municipal landfill		
A sewage treatment or waste stabilization plant		



<i>Use or Feature</i>	<i>On the Subject Land</i>	<i>Within 500 metres (1,640') of subject land</i> <i>(Indicate distance)</i>
A Provincially significant wetland (Class 1,2 or 3 wetland) or other environmental feature		
Floodplain		
A rehabilitated mine site		
A non-operating mine site within 1 kilometre		
An active mine site		
An industrial or commercial use (specify the use)		
An active railway line		
Seasonal wetness of land		
Erosion		
Abandoned gas wells		

Note: If there are any livestock operations within 500 metres (1,640 feet) of the subject land, please complete Form 3 which is available upon request.

G. CURRENT APPLICATION

1. Has the owner previously severed any land from this land holding or any other land the owner has interest in since August 24, 1978?

Yes No

If the answer to the above question is yes:

i) How many separate parcels have been created? _____

ii) Date(s) these parcels were created: _____



iii) Name (s) of the transferee(s) for each parcel: _____

iv) What uses were the parcels severed for? _____

2. If this application proposes to sever a dwelling made surplus through farm amalgamation (Please also include Form 1):

i) When were the farm properties amalgamated? _____

ii) Dates of construction of all dwellings within farm holding: _____

3. Has this property ever been part of an application for approval of a plan of subdivision or Consent/severance under the *Planning Act*?

Yes No

If yes, provide the file number and the decision made on the application.

File No.: _____ Decision: _____

4. Date of purchase of the subject land: _____

5. Previous use of property: _____

6. How many years has the owner farmed? _____

i) Outside this municipality but in Ontario: _____ ii) In this municipality: _____

iii) Other (please specify): _____

H. STATUS OF OTHER PLANNING APPLICATIONS

1. Is this property also the subject of an application for an Official Plan Amendment?

Yes No Unknown

If yes, indicate the file number and the status of the application.

File No. _____ Status _____



2. Is this property the subject of an application for a Zoning By-law Amendment, Minister’s Zoning Order Amendment, Minor Variance, or Plan of Subdivision?

Yes No Unknown

If yes, indicate the file number and the status of the application.

File No. _____ Status _____

3. Is there any other application on this property that would affect this application?

Yes No

If yes, please describe _____

I. OTHER INFORMATION

1. Is there any other information that you think may be useful in the review of this application? If so,

Please explain below or attach on a separate page:



J. Collection of Personal Information

Personal Information collected on this form is collected pursuant to the Planning Act and will be used for the purposes of processing this application. Questions about this collection may be directed to Haldimand County's Planning Division at 905-318-5932 ext. 6209 or planning@haldimandcounty.on.ca.

K. DECLARATION

Through submission of this application, I/we solemnly declare that I/we have reviewed and completed this application and all of the above statements and the statements contained in all of the exhibits/attachments transmitted herewith are true and correct. I acknowledge that all legislation and requirements governing this type of application shall be complied with whether specified herein or not. 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.



L. 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.

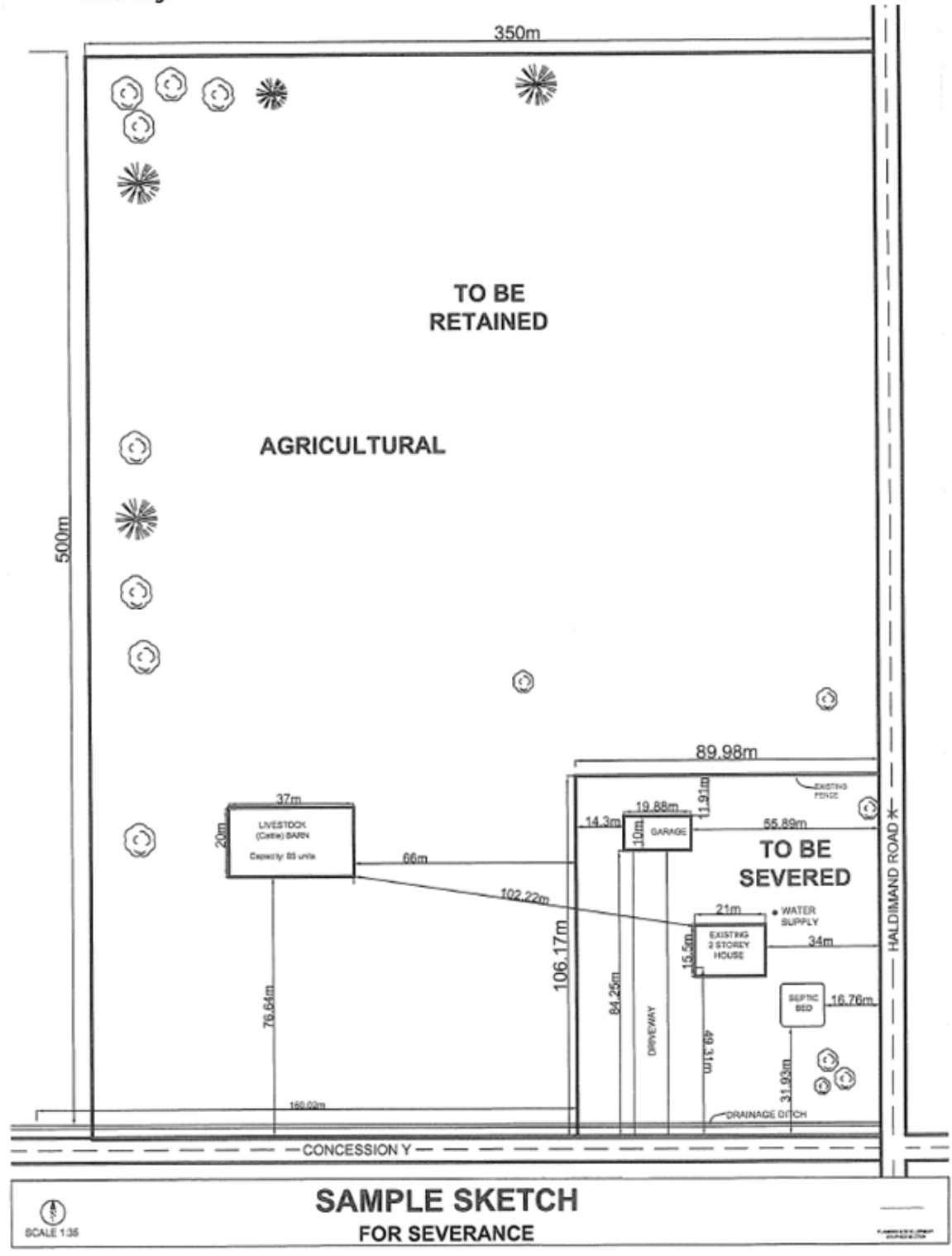
AUTHORIZATION OF OWNER (S)

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.

Acknowledgement of Owner(s) Authorization

Signature (s)

Date





M. SUBMISSION OF COMPLETE APPLICATION/FOR MORE INFORMATION

For submitting a complete application, getting additional information or assistance in completing this application, please contact the Committee of Adjustment Secretary-Treasurer at (905) 318-5932 (Ext. 6220) or a Planner at the office below. In case reference to Haldimand County maps is required to complete the application, they are available at the County website: www.haldimandcounty.on.ca . Complete applications can be submitted at the following offices Monday to Friday between 8:30 am and 4:30 pm:

Haldimand County Planning and
Development Division
53 Thorburn Street South
Cayuga ON N0A 1E0
Phone: (905)-318-5932