



Official Plan Amendment Application Form

Corporation of the Municipality of Meaford

Clerk

21 Trowbridge Street West

Meaford, ON N4L 1A1

Phone: 519-538-1060 Fax: 519-538-1556 Email: clerk@meaford.ca

This application is made to the Council of the Municipality of Meaford under Section 22 of the Planning Act, R.S.O. 1990.

Once signed and commissioned, this application shall be filed with the Clerk of the Municipality of Meaford, and accompanied by the fee made payable to the Corporation of the Municipality of Meaford. Notwithstanding the details contained in this Amendment Application, Council may modify any aspect of the proposed amendment, as deemed appropriate, prior to final approval.

Date Accepted: _____ **Accepted By:** _____ **File #:** _____ **Roll #:** _____

Type of Application:

- | | |
|--|-------------------|
| <input type="checkbox"/> Major Amendment/Secondary Plan Application Fee | \$21000.00 |
| (Payable to the Municipality) | |
| <input type="checkbox"/> Major Midscale Amendment Application Fee | \$11000.00 |
| (Payable to the Municipality) | |
| <input type="checkbox"/> Minor Amendment Application Fee | \$4000.00 |
| (Payable to the Municipality) | |
| <input type="checkbox"/> Grey Sauble Conservation Authority Fee | \$390.00 |
| (Required for all applications - Payable to Grey Sauble Conservation Authority) | |

Applicant Information:

1. Registered Owner(s): _____

Full Mailing Address: _____

Phone: _____ Fax/Email: _____

2. Applicant(s)/Agent(s) (if different then owner): _____

Full Mailing Address: _____

Phone: _____ Fax/Email: _____

Applicant's relationship to subject lands: _____

Communications should be sent to: **Owner(s)** **Applicant(s)** **Agent(s)**

Signs for posting on the lands should be sent to: **Owner(s)** **Applicant(s)** **Agent(s)**

Subject Lands:

1. Municipal Address: _____

Former Township/Town: St. Vincent Sydenham Meaford

Concession: _____ Lot: _____ Registered Plan: _____

Part(s): _____ of Lot(s) _____ Reference Plan: _____

Date Lands were acquired by current owner(s): _____

2. Description:

	Area (hectares)	Frontage (meters)	Depth (meters)
Entire Property			
Lands Affected (if only a portion)			

3. Current Official Plan Designation of the Lands and the uses authorized within the designation: _____

4. Current Zoning By-law Designation of the Lands: _____

5. Please indicate any environmental constraints apply to the subject lands:

- Wetlands Specialty Crop Lands Floodplains ANSI's
- Heritage Resources Streams, Ravines and Lakes Solid Waste Management
- Springs or Sinkholes Niagara Escarpment Plan Water Resources
- Aggregate Resources Thin Overburden (Karst) Sewage Treatment Plant
- Fisheries, Wildlife & Environment Wooded Areas and Forest Management

6. Indicate the Type of Road Access:

- Access Type**
- Provincial Highway Access
- County Road
- Open and Maintained Municipal Road Allowance
- Non-maintained/Seasonally Maintained Municipal Road Allowance
- Private Right-of-Way
- Water Access **(Not recognized by the Municipality of Meaford)**

7. If access to the subject land is by water only, what are the parking and docking facilities at the site and what is the approximate distance of these facilities from the subject land to the nearest public road? **(Not recognized by the Municipality of Meaford)**.
8. Indicate the applicable servicing at the subject property:

Types of Servicing	Existing	Proposed
Water Servicing (Municipal, Communal, Private Well)		
Sewer Servicing (Municipal, Communal, Private System)		
Storm Servicing (Storm Sewer, Ditches, Swales)		

Does this application permit development on privately owned and operated individual or communal septic systems, and if so, would more than 4500 litres of effluent a day be produced as a result of the development being completed?

Yes No N/A

If yes, you **MUST** provide a Servicing Options Report and a Hydrogeological Report.

9. Existing use of the lands and how long the use has continued (Agricultural, Residential, Commercial, Industrial, Vacant, Other): _____

10. Present use of abutting properties:

North _____ South _____

East _____ West _____

11. Does the Owner have any interest in the abutting lands? If yes, describe the interest.

Yes No

12. Is there an approved Site Plan and/or a Site Plan Control Agreement in effect on any portion of this subject lands?

Yes No

If yes, has an amendment to the Site Plan and/or agreement been applied for?

Yes No

13. Are there any easements, right-of-ways, restrictions, covenants, or other agreements applicable to the subject lands? (If yes, describe what they are, indicate on a drawing if applicable and include a Site Plan and/or Agreement if applicable):

14. Has the owner or applicant made an application for any of the following, either on or within 120 meters of the subject lands?

- Official Plan Plan of Subdivision Zoning By-law Amendment
 Consent Minor Variance Development Control Permit (NEC)
 Site Plan Control

If yes, please describe briefly (i.e. Date of application, file number, nature of application, effect on this application, etc.):

15. Related Farm Operations

a. What type of farming has been conducted on the subject property?

- Beef Dairy Swine Poultry Sheep Cash Crop

Other: _____

Describe in detail the size, age and feed type used for the type of farming that is conducted:

b. How long have you owned the farm? _____

c. Are you actively farming the land (or do you have the land farmed under your supervision)?

Yes – For how long? _____ No – When and Why did you stop? _____

d. Area of total farm holding: _____ Number of tillable acres: _____

e. Do you own any other farm properties? Yes No

If yes, Lot: _____ Concession: _____ Former Township: _____ Acres: _____

f. Do you rent any other land for farming purposes? Yes No

If yes, Lot: _____ Concession: _____ Former Township: _____ Acres: _____

g. Is there a barn on the subject property? Yes No

If yes, which part of the property does the barn fall on?

- Proposed Severed Proposed Retained

Condition of barn: _____ Present use of barn: _____

Size of barn: _____ Capacity of barn (livestock): _____

h. Indicate and describe the manure storage facilities on the subject lands:

Storage already exists _____

Liquid _____

Solid _____

No storage required (manure/material is stored for less than 14 days)

i. Are there any barns on other properties within 1000 meters (3,280 ft) of the proposed lot? Yes No

If yes, these barns and distances to the subject property must be shown on the sketch. And the following questions must be answered for each property containing a barn regardless of current use. You may use additional pages if necessary.

j. What type of farming has been conducted on this other property? _____

k. Number of tillable acres on this other property? _____

Size of barn on this other property? _____ Capacity of barn (livestock): _____

l. Type of manure storage on this other property? _____

Additional information may be required for Minimum Distance Separation (MDS) calculations – please discuss with Planning Staff prior to submitting your application.

Proposal Details:

16. Describe the nature and extent of the relief applied for and the proposed use of the subject lands: _____

17. Describe the reason for the proposed amendment(s): _____

18. Describe the timing for the proposed development, including phasing: _____

19. Provide the following details for all the building, both existing and proposed (Use separate page if necessary).

Building Type:	Existing	Proposed	Existing	Proposed
Date of Construction				
Ground Floor Area (m²)				
Gross Floor Area (m²)				
Number of Stories				
Width (m)				
Length (m)				
Height (m)				
Use				
Setback from front lot line (m)				
Setback from rear lot line (m)				
Setback from side lot line (m)				

20. Does the proposed amendment change, replace or delete a policy in the Official Plan? If yes, please indicate the policy that will be changed, replaced or deleted and the text for that requested amendment:

21. Does the proposed amendment add a policy to the Official Plan? If yes, please indicate the policy that will be added.

22. Does the proposed amendment change or replace a designation in the Official Plan. If Yes please indicate the existing and proposed designations:

23. Please indicate the land uses that the proposed amendment would permit:

24. **If the requested amendment changes or replaced a schedule in the Official Plan, please provide a copy of the schedule.**

25. Does the proposed amendment alter all or any part of the boundary of an area of settlement in the Municipality or establish a new area of settlement?

Yes No

If yes, please explain: _____

26. Does the requested amendment remove the subject land from an area of employment?

Yes No

If yes, please explain: _____

27. What is the planning rationale for requesting an Official Plan amendment? **Please attach a cover letter and planning report for all Official Plan Amendments.**

28. If the proposed use is Residential, indicate the proximity of the subject property to Community Facilities (parks, schools, etc) within 500 m.

29. Supplementary and support material to accompany application (please provide 10 copies of additional materials outlined in item 'c' below):

- a. A draft Official Plan Amendment
- b. A list of all associated planning applications being submitted for review along with the submission (minor variances, special permission, site plan control, consent. Subdivision, condominium, parking exemption, etc).
- c. Such further and other material as any official representing the Municipality of Meaford may request to enable the consideration of the application such as but not limited to:
 - i. Environmental Impact Study
 - ii. Commercial Marketing Analysis
 - iii. Functional Servicing Report
 - iv. Transportation/traffic Review
 - v. Noise Assessment
 - vi. Archaeological Report
 - vii. Property Survey
 - viii. Conceptual Development Plans

30. Names and addresses of all mortgages, holders or charges or other encumbrances with respect to the subject lands: _____

31. Is this application consistent with the policy statements issued under subsection 3(1) of the Planning Act? Yes No

32. Is the subject land within an area of land designated under any provincial plan or plans?

Yes No

If yes, does the application conform to, or does not conflict with the applicable provincial plan or plans? :

AFFIDAVIT – SOLEMN DECLARATION (Affidavits MUST be signed in the presence of a Commissioner of Oaths):

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

Of the **City/Town/Municipality** of _____ in the **County/Region** of _____

Solemnly declare that all statements contained in this application and all the information provided is true, and I/we 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 and by virtue of the **CANADA EVIDENCE ACT**.

I have been advised that incomplete and/or inaccurate information will delay the procession of my application and may results in additional costs to me.

DECLARED before me at the

City/Town/Municipality of _____ in the **County/Region** of _____

This _____ day of _____, 20_____.

Signature of Owner(s) or Agent(s)

Date

Signature of Owner(s) or Agent(s)

Date

Signature of Commissioner

Date

Applicant's Consent (Freedom of Information), Authorization For Access & Signage Agreement:

In accordance with the provision of the Planning Act, it is the policy of the Municipality to provide public access to all development applications and supporting documentation. In submitting this development application and supporting documentation,

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

Of the **City/Town/Municipality** of _____ in the **County/Region** of _____

Hereby acknowledge the above-noted and provide my (our) consent, in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agents, consultants and solicitors, as well as commenting letters of reports issued by the municipality and other review agencies will be part of the public record and will also be available to the general public. **AND;**

Hereby confirm that the required notice signs will be posted on the lands as instructed and further indemnify the Municipality from any damages resulting from the improper postings of this sign. **AND;**

Hereby permit Municipal Staff and its representatives to enter upon the premises for the purpose of performing inspections of the subject property.

Signature of Owner(s)

Date

Signature of Owner(s)

Date

Signature of Witness

Date

OWNER(S) AUTHORIZATION OF AGENT

(Only required if the applicant or agent is not the registered owner):

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

Of the **City/Town/Municipality** of _____ in the **County/Region** of _____

Registered owner of _____
Property Description

Do hereby authorize _____
Name(s) of Authorized Agent(s)

To act as my (our) agent for the purposes of this application.

Signature of Owner(s) *Date*

Signature of Owner(s) *Date*

Signature of Witness *Date*

AFFIDAVIT - COSTS OF APPLICATION

(Affidavits **MUST** be signed in the presence of a Commissioner of Oaths):

I/We _____ and _____
Name of Owner(s) *Name of Owner(s)*

Of the **City/Town/Municipality** of _____ in the **County/Region** of _____

Hereby acknowledge receiving and reviewing the fee and tariffs related to planning matters. I further understand and agree to be bound by the tariff and specifically agree that I shall pay full cost recovery for any planning matters listed in the fee tariff.

I understand and agree that the Fee and any associated Deposit submitted with this application covers only the anticipated processing cost (i.e. review by the Municipality, on Public Meeting and documents if approved). It is further understood and agreed that any additional costs or requirements, incurred and charged by the Municipality (i.e. Planning, Legal or Engineering Fees, O.M.B. hearing costs, Agreements, Special Studies, other Approvals or Applications and any other related matters), will be my/our responsibility to pay and/or reimburse the Municipality for same. Failure to pay all associated costs may result in refusal of this application and if not paid forthwith after being invoiced, I agree that such costs shall be added to my municipal tax bill and collected by the Municipality in the same manner such as municipal taxes, or by any other means legally available to the Municipality.

DECLARED before me at the

City/Town/Municipality of _____ in the **County/Region** of _____

This _____ day of _____, 20_____.

Signature of Owner(s)

Date

Signature of Owner(s)

Date

Signature of Commissioner

Date