



Corporation of the
Township of Tay

450 PARK ST.
P.O. BOX 100
VICTORIA HARBOUR
ONTARIO L0K 2A0

(705) 534-7248
FAX (705) 534-4493

**ZONING BY-LAW AMENDMENT
APPLICATION**

- ☐ Zoning By-law Amendment
- ☐ Interim Control By-law
- ☐ Temporary Use By-law
- ☐ Hold Removal

File No. _____

Application Fees

Minor Application - Site Specific - **\$2,500 plus \$2,000 deposit**

Major Application - May be associated with Plan of Subdivision - **\$4,000 plus \$2,000 deposit**

Temporary Use By-law - **\$1,500.00**

Hold Removal - **\$500.00**

Pursuant to Section 34 of the Planning Act, R.S.O. 1990, as amended, I/We hereby submit this application to the Township of Tay in respect of the lands hereinafter described for an Amendment to the Township of Tay Zoning By-law.

A. OWNERSHIP/APPLICANT DETAILS

- 1.** Name of Owner(s): _____

Address: _____

Postal Code: _____ Telephone No. (____) _____
Email Address: _____
Date subject lands acquired by owners: _____

- 2.** Name of Authorized Agent (if any) _____

Address: _____

Postal Code: _____ Telephone No. (____) _____
Email Address: _____

NOTE: It is requested that all communications be sent to:
Owner _____ **Agent** _____

3. Names and addresses of any mortgages, holders or charges or other encumbrances:

B. PROPERTY DETAILS

4. Description of Subject Lands:

Concession # _____ Lot(s) _____
Registered Plan # _____ Lot(s) _____
Reference Plan # _____ Part(s) _____

Name of Fronting Street and Street # _____

5. Dimensions of Subject Lands (metres/hectare):

a) Frontage (metres) _____
b) Depth (metres) _____
c) Area (metres) _____

SERVICES

- (a) Please indicate how potable (drinking) water is provided to subject lands:

☐ Municipal water system
☐ Private water system
☐ Well
☐ Lake or other surface water source
☐ Other, please specify _____

- (b) Please indicate how sewage disposal is provided to subject lands:

☐ Municipal sewage treatment system
☐ Private communal sewage disposal
☐ Private septic system
☐ Other, please specify _____

- (c) Please indicate how storm drainage is provided to the subject lands:

☐ Storm sewers
☐ Ditches and swales
☐ Other, _____

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| C. PROPOSAL DETAILS |
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6. Provide and explanation of the Application and Proposal Amendment:

a) Current Official Plan designation of subject lands:

b) Current Zoning of the Subject Lands:

c) Proposed rezoning, including nature and extend of the rezoning and reason for request (If space is insufficient, please attach additional paper)

d) The Proposed Uses of the Subject Lands?

e) Would the requested amendment change, replace or delete a policy in the Official Plan?

___NO ___YES, Section Numbers:_____

f) Would the requested Amendment add a policy to the Official Plan?

___YES ___NO

g) If you answered YES to (c) or (d), state the purpose of the Proposed Official Plan Amendment:

h) Does the requested Amendment propose to change or replace the Current land use designation in the Official Plan?

___YES ___NO

If YES, please state the proposed land use designation:

- i) Have the subject lands ever been the subject of, or are currently the subject of, any of the following Planning Applications:

YES NO

| | | |
|-------|-------|-------------------------------------|
| _____ | _____ | Consent |
| _____ | _____ | Plan of Subdivision |
| _____ | _____ | Rezoning Application |
| _____ | _____ | Official Plan Amendment Application |
| _____ | _____ | Site Plan |

- j) If yes to any of the above, please indicate Application File Number and the status of the Application

- k) Does the application remove lands from an area of employment?
() Yes () No

If Yes, provide details of the Official Plan or Official Plan Amendment that deals with the matter.

- l) Please indicate if any of the following are located within 500 m

- | | |
|---|---|
| <input type="checkbox"/> Wetland | <input type="checkbox"/> Livestock buildings |
| <input type="checkbox"/> Floodplain | <input type="checkbox"/> Specialty crop lands |
| <input type="checkbox"/> Stream, ravine or lake | <input type="checkbox"/> Aggregate extraction sites |
| <input type="checkbox"/> Wooded area | <input type="checkbox"/> Waste disposal sites (open or closed) |
| <input type="checkbox"/> ANSI | <input type="checkbox"/> Sewage treatment plant |
| <input type="checkbox"/> Environmentally zoned or designated land | <input type="checkbox"/> Industrial uses |
| <input type="checkbox"/> Sensitive groundwater features | <input type="checkbox"/> Gas station or fuel storage |
| <input type="checkbox"/> Steep slopes | <input type="checkbox"/> Municipal wellhead or water intake protection area |

7. **Archaeological Potential**

Does the subject land contain any known archaeological resources or areas of archaeological potential? () **Yes** () **No**

If Yes, attach an archaeological assessment prepared by a person who holds a licence that is effective with respect to the subject land, issued under Part VI (Conservation of Resources of Archaeological Value) of the Ontario Heritage Act; and, a conservation plan for any archaeological resources identified in the assessment.

8. **Potential Contaminants**

Has there ever been an industrial or commercial use, including a storage of gasoline or other fuels, on the subject land or adjacent land? () **Yes** () **No**

If Yes, please provide a description of each:

9. Has there ever been a hazardous materials or waste storage/disposal/or transfer facility on the subject lands or within 500m of the subject lands?

() **Yes** () **No**

If Yes, please provide a description of each:

10. Has there ever been an underground storage tank on the subject land?

() **Yes** () **No**

If Yes, please provide a description of the location, purpose and age of the tank:

11. Is there any reason to believe the subject lands have been contaminated by former uses on the subject land or adjacent lands?

() **Yes** () **No**

Please indicate the reason for your opinion:

12. Does the application conform to the Township of Tay Official Plan?

() **Yes** () **No**

Note: Unless otherwise identified by the municipality, you must have a qualified planner submit a full explanation of how your application conforms to the Township of Tay Official Plan. Municipal clarification regarding this requirement may be obtained through the application pre-consultation process.

If **No**, is the subject land under review of an application under the Planning Act for an Official Plan Amendment?

() **Yes** () **No**

If **Yes**, provide an application number and the status of the application for each application:

Note: if your application does not conform to the Official Plan, as determined by the municipality, and an Official Plan Amendment is not applied for and not approved, your application will be denied.

13. **County of Simcoe Planning Status**

What is the current land use designation in the County of Simcoe Official Plan?

Does the application conform to the County of Simcoe Official Plan?

(☐)**Yes** (☐)**No**

Note: Unless otherwise identified by the municipality, in writing, you must have a qualified planner submit a full explanation of how your application conforms to the County of Simcoe Official Plan. Municipal clarification regarding this requirement may be obtained through the application pre-consultation process.

If **No**, is the subject land under review of an application under the Planning Act for an Official Plan Amendment?

(☐)**Yes** (☐)**No**

If **Yes**, provide an application number and the status of the application for each application:

Note: If your application does not conform to the County of Simcoe Official Plan, as determined by the municipality, and a County Official Plan Amendment is not applied for and not approved, your application will be denied.

Please indicate if any of the following apply (Y/N)?

___ The subject lands access a County Road

___ The subject lands drain to a County Road

___ The subject lands are in or within 120m of County Greenlands

___ The subject lands are within 500m of a proposed, active or closed County landfill

___ The subject lands are adjacent to a County Forest

14. **Provincial Policy conformity - Provincial Planning Statement**

Is the application consistent with policy statements issued under subsection 3(1) of the Planning Act?

(☐)**Yes** (☐)**No**

Note: Unless otherwise identified by the municipality, you must have a qualified planner submit a full explanation of how your application is consistent with policy statements issued under subsection 3(1) of the Planning Act. Municipal clarification regarding this requirement may be obtained through the application pre-consultation process. If your application is not consistent with the policy statement issued by the Province, as determined by the municipality, your application will be denied.

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| D. DRAWING DETAILS |
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15. A SURVEY OR SCALE DRAWING IN METRIC, SHOULD BE SUBMITTED WITH THE APPLICATION, AND SHOULD INCLUDE:

- a) The boundaries of the owner's total holding with dimensions;
- b) The boundaries of the "Subject Land" with dimensions;
- c) The location, widths and names of the existing streets or highways which abut the subject lands;
- d) The location, size and use of all proposed and/or retained buildings, with dimensions and relationship to the lot boundaries clearly marked thereon;
- e) The location and size of proposed parking area(s) with dimensions and proposed surface marked thereon;
- f) The location of any landscaping and/or fencing proposed, with the type and height clearly marked thereon;
- g) Natural and artificial features (existing and proposed) such as buildings, railways, highways, pipelines, watercourses, drainage ditches, swamps and wooded areas within or adjacent to the subject land, as well as the location of any septic tank, tile bed or well;
- h) The location and direction of any lighting proposed;
- i) The slope of the land, in order to establish the relationship between the grade of abutting highways and the grade of the subject land, and to determine the drainage of the land (this information may be given in the form of contours, spot elevations or written description);
- j) Any rights-of-way or other easements on or abutting the subject lands

NOTE: For the purposes of Ontario Regulation No. 198/96, a survey or Scale Drawing is not required for the consideration of the Application

REPORTS

| Required Report | Submitted (Y/N) | Title | Author | Date |
|--|--------------------|-------|--------|------|
| Environmental Impact Study | | | | |
| Master Servicing Study | | | | |
| Archaeological Site Assessment | | | | |
| Cultural Heritage Impact Study | | | | |
| Agricultural Minimum Distance Separations Study | | | | |
| Traffic Impact Study | | | | |
| Storm Water Management Report | | | | |
| Urban Design Report | | | | |
| Fisheries Impact/Marina Impact Study | | | | |
| Environmental Site Assessment and Record of Site Conditions | | | | |
| Wellhead/Water Intake Protection Area – Risk Assessment Report | | | | |
| Flooding, erosion, slope stability reports including coastal engineering studies | | | | |
| Noise/Vibration Impact Analysis | | | | |
| Odours/Dust/Nuisance Impact Analysis | | | | |
| Illumination Study | | | | |
| Geotechnical/Soil Stability Report | | | | |
| Wind Study | | | | |
| Archaeological Study | | | | |
| Architectural/Cultural Heritage Report | | | | |
| Planning Justification Report | | | | |

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| E. SIGNATURES |
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16. Affidavit/Declaration

I, _____ of
_____ in the County of Simcoe solemnly declare that:

ALL of the above statements and the statements contained in all of the exhibits submitted 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 and by virtue of the "Canada Evidence Act".

DECLARED before me at the Township of Tay

In the County of Simcoe this _____ day of _____ in the year _____

Signature of Applicant

A Commissioner, etc.

17. Owners Statement

As of the date of this application, I/We are the registered owner(s) of the lands described in this application. I/We examined the contents of this application and certify as to the correctness of the information submitted with the application insofar as I/We have knowledge of these facts. I/We concur with the submission of this application to the Township of Tay.

Signed

Date:

Owner

Owner

Note: If the owner is a Corporation, the application shall be signed by an officer of the Corporation and the Corporations Seal shall be affixed.

Personal information contained on this form/document/application is collected pursuant to the Planning Act and will be used for the purpose for which it was collected. Questions about this collection or it's disclosure should be directed to the Clerk of the Township of Tay.

18. **Acknowledgement**

The Applicant hereby signifies and acknowledges the payment of the Planning Application Fee as established by By-Law to the Township as a fee at the time of filing of this application.

The Applicant hereby signifies and acknowledges that the fees or portion thereof are to be held as a deposit to cover any legitimate costs in processing this application. Legitimate costs may include but are not limited to, legal, planning, landscape, architecture, etc. services.

The Applicant hereby acknowledges and agrees that if the Township deems it necessary to retain outside professionals in order to process and consider the application, the cost of these services shall be deducted from the deposit. If the deposit is depleted, all work on the processing and consideration of the application will stop until the deposit is returned to its required amount. Once the application has been finalized any surplus deposit shall be returned to the Applicant. **NO ASSURANCE IS GIVEN THAT THE PAYMENT OF THE FEE WILL RESULT IN APPROVAL.**

Signed: _____
Date: _____

Personal information contained on this form/document/application is collected pursuant to the Planning Act and will be used for the purpose for which it was collected. Questions about this collection or it's disclosure should be directed to the Clerk of the Township of Tay.

19. **Additional Fees**

If Planning, Engineering, Legal or any other fees are incurred by the Township pertaining to this Application, or an appeal to the Local Planning Appeals Tribunal in defense of an approval by the Township of this Application, the Applicant by endorsing below, hereby agrees to pay all such reasonable costs specific to the Application as incurred by the Township, upon receipt of an invoice for same.

Signature of Owner/Agent _____ Date: _____

.....

20. **Application Material**

The applicant acknowledges that the Township considered the application forms and all supporting material, including studies and drawings, filed with this application are considered to be public information and form part of the public record.

In making or authorizing submission of this development application and supporting documentation, I/we, the owner or agent acting with authority on behalf of the owner hereby acknowledge the above-noted and provide my/our full consent in accordance with the provisions of applicable Provincial and Federal legislation that the information on this application and any and all supporting documentation provided by myself/ourselves, the applicant, agents, consultants and solicitors, as well as commenting letters or reports issued by the Corporation of the Township of Tay (hereinafter the "**Municipality**") and other review agencies, will be part of the public record, may be published and distributed by the municipality in any form, and will also be fully available to the general public.

Signed:_____ Date:_____

FOR OFFICE USE ONLY:

Date Complete Application Received_____

Checked by_____

Amendment File No. _____

Comments: _____



**Corporation of the
Township of Tay**

**450 PARK ST.
P.O. BOX 100
VICTORIA HARBOUR
ONTARIO L0K 2A0
(705) 534-7248
PHONE
(705) 534-4493 FAX**

PERMISSION TO ENTER

Date: _____

Township of Tay
Planning & Development Department
450 Park Street
P. O. Box 100
Victoria Harbour, ON L0K 2A0

Dear Sir/Madam:

Re: Submission of Planning Application

Address of Subject Property: _____

I hereby authorize the members of the Committee and members of the staff of the Township of Tay to enter onto the above-noted property for the limited purposes of evaluating the merits of this application.

Signature of Owner or Authorized agent

Please print name

REFUND OF DEPOSIT BALANCE

Acknowledgement Form

Date:

Municipal Address:

Owner Name:

Applicant Name:

Purpose of Application:

I/We hereby acknowledge and recognize that the deposit paid with this application will be returned to the **Current Owner** at such time as the request is formally made and the works are completed to the Township's satisfaction.

Signature of Applicant
Date

Signature of Owner
Date