



Township of Central Frontenac

1084 Elizabeth Street, P.O. Box 89, Sharbot Lake, Ontario, K0H 2P0
 Telephone: 613-279-2935 or 1-800-300-6851 (613 area code only) Fax: 613-279-2422
 E-mail: planning@centralfrentenac.com

CONSENT APPLICATION

*The Planning Act, Section 53(2)
 Ontario Regulation 547/06*

1. APPLICANT INFORMATION

| | |
|------------------------------|------------------------------|
| Name of Owners(s): | Name of Agent*: (see below) |
| Address: | Address: |
| Home Phone Number: | Home Phone Number: |
| Work Phone Number: | Work Phone Number: |
| Cell/Alternate Phone Number: | Cell/Alternate Phone Number: |
| Fax: | Fax: |
| Email Address: | Email Address: |

2. LOCATION OF SUBJECT LAND

| | |
|--------------------------------|-------------------------|
| Geographic or Former Township: | Assessment Roll Number: |
| Civic Address and Road Name: | Lot/Part Lot(s): |
| Concession: | Plan #: |



3. PURPOSE OF APPLICATION

3.1 Type and Purpose of the proposed transaction (check appropriate space)

| | |
|------------------------|------------------------------------|
| Creation of a New Lot: | Mortgage: |
| Addition to a Lot: | Lease: |
| Right-Of-Way: | Correction or Validation of Title: |
| Easement: | Other Purpose (Please Specify): |

****Please Note: If purpose is correction of title, attach copy of transfer containing incorrect description. If purpose is validation of title, attach copy of transfer, which did not have Planning Act consent.****

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

3.3 If a lot addition, identify/describe the lands to which the parcel will be added: (Also illustrate on the required sketch):

4. LOCATION OF SUBJECT LAND

4.1 Description of land intended to be severed:

| | |
|--------------------------------|--------------------------------|
| Frontage (m): | Area (ha): |
| Depth (m): | Existing Use: |
| Proposed Use: | Existing Buildings/Structures: |
| Proposed Buildings/Structures: | Other: |



4.2 Description of land intended to be retained:

| | |
|--------------------------------|--------------------------------|
| Frontage (m): | Area (ha): |
| Depth (m): | Existing Use: |
| Proposed Use: | Existing Buildings/Structures: |
| Proposed Buildings/Structures: | Other: |

4.3 Are there any easements or restrictive covenants affecting the subject land?

Yes No

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

4.4 Type of Access (Check Appropriate Box):

| Type of Access | Severed Lot | Retained Lot |
|---------------------------------------|--------------------------|--------------------------|
| Provincial Highway: | <input type="checkbox"/> | <input type="checkbox"/> |
| Township Road, Maintained Year-Round: | <input type="checkbox"/> | <input type="checkbox"/> |
| Township Road, Maintained Seasonally: | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Public Road (Please Specify): | <input type="checkbox"/> | <input type="checkbox"/> |
| Right-Of-Way: | <input type="checkbox"/> | <input type="checkbox"/> |
| Water Access (Please Describe): | <input type="checkbox"/> | <input type="checkbox"/> |

4.5 If located on a township road, is there an existing township approved entrance to proposed severed lot?

Yes No

If no, please indicate on sketch, location of proposed entrance for Public Works Manager's inspection purposes.



4.6 If located on water: What is the name of the body of water?:

4.7 Type of water supply existing or proposed (check appropriate box):

| Type of Water Supply | Severed Lot | Retained Lot |
|--|--------------------------|--------------------------|
| Privately owned and operated individual well | <input type="checkbox"/> | <input type="checkbox"/> |
| Privately owned and operated communal well | <input type="checkbox"/> | <input type="checkbox"/> |
| Lake or other water body | <input type="checkbox"/> | <input type="checkbox"/> |
| Other means (Please specify): | <input type="checkbox"/> | <input type="checkbox"/> |

4.8 Type of sewage disposal existing or proposed (check appropriate box):

| Type of Sewage System | Severed Lot | Retained Lot |
|---|--------------------------|--------------------------|
| Privately owned and operated individual sewage system | <input type="checkbox"/> | <input type="checkbox"/> |
| Privately owned and operated communal sewage system | <input type="checkbox"/> | <input type="checkbox"/> |
| Pit Privy | <input type="checkbox"/> | <input type="checkbox"/> |
| Other means (Please specify): | <input type="checkbox"/> | <input type="checkbox"/> |

4.7 Other services (Please check if the service below is available):

| | |
|-------------------------------|--------------------------|
| Electricity | <input type="checkbox"/> |
| School Busing | <input type="checkbox"/> |
| Other means (Please specify): | <input type="checkbox"/> |

5. LAND USE AND HISTORY OF THE SUBJECT PROPERTY

5.1 Has the subject land ever been the subject of an application for approval of a plan of subdivision or a consent under the Planning Act?

- Yes No Unknown

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



5.2 Has any land been severed from the parcel originally acquired by the current owner of the subject land?

- Yes No Unknown

If yes and if known, indicate previous severances on the required sketch and supply the following information for each lot severed.

Date of Transfer: _____

Name of Transferee: _____

Land Use of Parcel: _____

5.3 Has any land been severed from the parcel by the prior owner(s)?

- Yes No Unknown

If yes and if known, please provide below any names & if possible current addresses of prior owners of which you may be aware.

5.4 Did the current owner acquire the subject land as a result of a consent (i.e. was a lot severed and transferred to the current owner)

- Yes No If yes, prior owner should be noted in 5.3 above.

5.5 Current Zoning: _____

5.6 Current Official Plan Land Use Designation: _____

5.7 Is the subject land currently the subject of a proposed official plan or official plan amendment that has been submitted for approval?

- Yes No If yes, specify the file number and status of the application.

5.8 Is the subject land the subject of any other application under the Act such as a Zoning By-law Amendment; a Minister's Zoning Order Amendment; a Minor Variance; another Consent; or an approval of a Plan of Subdivision?

- Yes No If yes, specify the following:

Type of Application: _____

File Number: _____

Status of Application: _____

5.9 Is the application consistent with policy statements issued under subsection 3 (1) of the planning act?

- Yes No



If so, please explain how the application meets the Provincial Policy Statement:

Four horizontal lines for providing an explanation.

6. OTHER INFORMATION

6.1 Is there any other information that you think may be useful to the Committee of Adjustment or other agencies in reviewing this application?

If so, explain below or attach a separate sheet if necessary.

Three horizontal lines for providing other information.

7. AFFIDAVIT OR SWORN DECLARATION

I _____ of the _____ of _____ in the _____ of _____ 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 _____ of _____ in the _____ of _____, this _____ day of _____, _____

Commissioner of Oaths (include stamp below)

Signature of Applicant/Solicitor or Authorized Agent



8. AUTHORIZATION (If applicable)

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 for consent and I authorize _____ to make this application on my behalf.

Date

Signature of Owner

**IMPORTANT – PLEASE READ
NOTICE OF COLLECTION
MUNICIPAL FREEDOM OF INFORMATION
AND PROTECTION OF PRIVACY ACT**

9. Personal information collected on this form is collected under the authority of the Planning Act, R.S.O. 1990, as amended and will be used to assist in making a decision on this matter. All names, Addresses, opinions and comments will be made available for public disclosure. Questions Regarding this collection should be forwarded to: The Clerk, Township of Central Frontenac, 1084 Elizabeth Street, P.O. Box 89, Sharbot Lake, ON K0H 2P0, Telephone (613) 279-2935 ext. 227.

9.1 All information requested in this form is mandatory and is either prescribed under Ontario Regulation 547/06 or required by the Committee of Adjustment.

9.2 If an application is deemed to be incomplete, it will be returned, and the time period referred to in subsection 53 (14) for an appeal to the Ontario Municipal Board for failure to make a decision does not begin.

9.3 Consent notification list: Please provide, (if possible) on page 7, a list of names of all property owners whose properties are within 60 metres (200') of any lot lines of the subject lands (this includes both the proposed severed lot and the retained portion)

9.4 Please indicate on the enclosed key map, the location of the subject property.

9.5 In order to enable the required personnel to inspect the property, please provide on Page 7, clear & concise directions to the subject land. If property is not located on a highway or township road, please provide a sketch below or on the reverse. Please note it is very important that the directions are adequate. If the inspectors are unable to locate the subject lands because of poor directions, your application can be delayed.

9.6 It is required that two (2) copies of the application along with the prescribed fee be filed with the Secretary Treasurer of the Township of Central Frontenac Committee of Adjustment accompanied by the prescribed fee in cash or by cheque payable to the Township of Central Frontenac.



AGREEMENT TO INDEMNIFY

The applicant hereby agrees to indemnify and save harmless The Corporation of the Township of Central Frontenac (“the Municipality”) from all costs and expenses that the Municipality may incur in connection with the processing of the applicant’s application for approval under the Planning Act.

Without limiting the foregoing, such costs and expenses will include all legal, engineering, planning, advertising and consulting fees and charges incurred or payable by the Municipality to process the application together with all costs and expenses arising from or incurred in connection with the Municipality being required, or requested by the applicant, to appear at the hearing of any appeal to the Ontario Municipal Board from any decision of the Council or Committee of Adjustments, as the case may be, approving the applicant’s application.

The applicant acknowledges and agrees that if any amount owing to the Municipality in respect of the application is not paid when due, the Municipality will not be required to process or to continue processing the application, or to appear before the Ontario Municipal Board in support of a decision approving the application until the amount has been paid in full.

The applicant further acknowledges and agrees that any amount owing by the applicant to the Municipality is, when due, a debt of the applicant and the Municipality may, in addition to any other remedies available to it at law, recover the amount owing together with interest from the applicant by action.

Date

Signature of Owner

Owner’s Name (Printed)



REQUIRED SKETCH

Owner: _____ Geographic Township of: _____

Lot: _____ Con: _____ PT Lot: _____ Plan: _____

Note: To ensure that this application proceeds without any unnecessary delays, please be sure to complete a reasonably accurate sketch illustrating all the required information as outlined below:

- The boundaries and dimensions of the subject land (i.e. both the part that is to be severed and the part that is to be retained).
- The boundaries and dimensions of any land abutting the subject land.
- The distance between the subject land and the nearest township lot line or landmark, such as a municipal road, bridge, etc.
- The location of all previously severed from the parcel originally acquired by the current owner of the subject land.
- The approximate location of all natural and artificial features on the subject land and on the land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application, such as buildings, roads, watercourses, wetlands, wooded areas, wells and septic tanks.
- The existing use(s) on adjacent lands such as but not limited to residential, agricultural and commercial uses.
- The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, A public traveled road, a private road or a right-of-way.
- If access to the subject land is by water only, the location of the parking and boat docking facilities to be used.
- The location and nature of any easement affecting the subject land.
- **If a lot addition, clearly identify the lands to which the subject parcel will be added.**

NOTE: Please indicate on the sketch where the land-marking card is to be posted.

A large, empty rectangular box with a thin black border, intended for the applicant to draw a sketch of the subject land and its surroundings as required by the application process.



CONSENT NOTIFICATION LIST

List of property owners whose properties are located within 60 metres (200') of any lot line of the subject property:

Directions to site:

In order to assess your application, the site must be inspected by the Secretary Treasurer, Building Inspector, and the Public Works Manager, and when necessary the Local Health Inspector; and a representative of the Conservation Authority. Please provide clear, concise directions below. If the subject property is not located on a highway or a main township road, please include a simple sketch below to assist the inspector(s).