

Township of Drummond/North Elmsley APPLICATION FOR OFFICIAL PLAN AMENDMENT

310 Port Elmsley Road, R.R. #5 Perth, ON K7H 3C7 (p) 613-267-6500 (f) 613-267-2083 www.dnetownship.ca

Note: All questions on this	OFFICE USE ONLY		
application must be answered or the application will be deemed	Date Received:		Receipt No.
incomplete and returned. Prior to submitting this	Application Complete? Yes □ No □	Date deemed complete:	File No. OP
application, property owners and agents are encouraged to pre-	Additional Information Required:		Fee Paid (date):
consult with the Township Planner.			Proposed Committee Meeting Date:

(To be submitted to the Township Office with the required **<u>DEPOSIT of \$1500.00</u>**)

The undersigned hereby applies to the Township Of Drummond/North Elmsley under Section 21 of the *Planning Act* for amendment to the Official Plan in respect of lands herein described, as outlined in this application.

The undersigned hereby acknowledges that the filing of this application alone does not necessarily constitute fulfilling all the requirements of either the Township or the *Planning Act*.

1. Name of Property Owner(s)

Mailing Address	

Telephone (Home)	(Work)	Email
1 1 1		

2. Name of Applicant/Agent_____

<u>Note:</u> If Applicant/Agent is different than Property Owner, the Owner's Authorization is required (see page 6)

Mailing Address	<u>S</u>	
e		

Telephone _____ Email _____

Correspondence should be directed to:

Property Owner	Applicant/Agent 🗆	Both 🗆
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3.	Description of subject land:
J.	Description of subject land.

•	Lot(s) Concession(s) Ward
	Reference Plan Part(s)
	Registered Plan Lot/Block(s)
	Assessment Roll Number 0919
	Street Address (No. /Rd. Name)
	Dimensions of subject land: Frontage Depth Area
	Survey Attached: Yes □ No □
	Approximate area covered by proposed amendment (if different from above): Area
	Date of acquisition of property by current owner:
)
(b)	Land uses authorized by current Official Plan designation
. (a)	Check the best descriptions of the proposed amendment to the Official Plan:PolicyDesignation
	i) changes policy (i) changes land use designation
	ii) replaces policy (ii) replaces land use designation
	iii) deletes policy
	iv) adds policy

(b)	Specify the <u>policy</u> (text) proposed to be changed/replaced/deleted: (Attach and reference additional page(s) if required. If no text to be changed, enter "N/A")					
(c)		Specify the land use <u>designation</u> (mapping schedule) to be changed/replaced: (If mapping not to be changed, enter "N/A")				
8.		ber of Zoning Ame		By-law Amendment Application, please ion.		
9. (a)	-	proposed Official has been been been been been been been bee				
(b)	Land uses auth	orized/permitted l	oy proposed Offici	ial Plan amendment:		
		, please attach proj		Schedule'' (map land use designation) of t schedule (map), including		
	Attached \Box	Not Attached	□ No	ot Applicable		
11.		mendment change ch the text of the p	· •	es or adds a "Policy" (text) of the Official ent:		
	Attached \Box	Not Attached	□ No	ot Applicable		
12.	application for a	pproval of an Offi	cial Plan amendm	<u>the subject land</u> the subject of an nent, a zoning by-law amendment, a ce, a plan of subdivision, a consent or a		
	Yes 🗆	No 🗆	Unknown \Box (S	ee Township for more information)		

13. If the answer to question 12 is yes, please provide the following information:

File Number(s)	Approval Authority
Lands affected by application:	
Geographic Township	Lot(s) Concession(s)
Registered PlanLot(s)	Reference PlanPart(s)
Street Address	Assessment Roll Number
Purpose of Application:	
Status of Application:	
Effect of application on proposed Official Plan	amendment:

14. Type of water provided to the subject land: (check appropriate space(s))

	Existing	Proposed
Publicly owned/operated piped water system		
Privately owned/operated communal well		
Privately owned/operated individual well		
Other (please specify)		

15. Type of sewage disposal provided to the subject land: (check appropriate space(s)):

	Existing	Proposed
Publicly owned/operated sanitary sewage system		
Privately owned/operated septic system		
Privy, or other means (please specify)		

- 16. Would the proposed amendment permit development on a privately owned and operated individual or communal septic system that results in more than 4500 litres of effluent being produced per day upon completion of the development?
 - Yes \Box No \Box

If yes, please attach (a) a *servicing options report* and (b) a *hydrogeological report*. Attached \Box Not Attached \Box Not Applicable \Box

17. Is the proposed amendment consistent with the Provincial Policy Statement issued under section 3(1) of the *Planning Act*?

Yes \Box No \Box Planning Rationale Attached \Box

(Please attach any planning rationale or justification provided in support of this application.)

- (a) Is the subject land within an area of land designated under any provincial plan or plans?
 Yes □ No
 - (b) If yes, does the proposed amendment conform to the provincial plan or plans? Yes \Box No \Box
- **19.** Does this amendment also require a concurrent amendment to the Lanark County Sustainable Communities Official Plan?

Yes \Box No \Box Unknown \Box (See Township for more information)

AFFIDAVIT/SWORN DECLARATION OF APPLICANT

(Must be Completed & Witnessed*)

I/We,				
of the	of	in -	the	
of contained in this applic that it is of the same fo Evidence Act".	ation and in the	e accompanying		e, acknowledging
Signature of Applicant*	:	Signature of	of Applicant*	
Sworn before me at the		of		in the
	_of	this	day of	20
OWNER'S AUTH		FOR AGENT T leted if agent app		JCATION
I/We, am/are the owner(s) of Official Plan and I/We a this application on my/c	authorize	•	-	
Signature of Owner(s)*	Signature	e of Owner(s)*	Date	
Forward COMPLETH (payable: Township of I Township of Drummon K7H 3C7	Drummond/Nor	th Elmsley) <u>to:</u>		5, Perth, ON

Provide Township with Agency forms/fees, unless otherwise arranged with Township.

- * To be witnessed by a Commissioner for taking affidavits.
- * If joint ownership, signature of each individual is required.
- * If the applicant is a corporation, the application shall be signed by an Officer of the corporation and the corporation's seal shall be affixed to such signature.

FREEDOM OF INFORMATION/ACCESS TO PROPERTY **CONSENT OF OWNER**

_____, are the registered owner(s) of the lands subject I/we, _____ to this application for Minor Variance, and, for the purposes of the Freedom of Information and Protection of Privacy Act, I/we hereby authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected under the authority of the *Planning Act* for the purposes of processing this application. I also authorize and consent to representatives of the Township of Drummond/North Elmsley and the persons and public bodies conferred with under Section 45 of the *Planning Act* entering upon the lands that are the subject of this application for the purpose of conducting any site inspections as may be necessary to assist in the evaluation of this application.

Date: Signature of Owner(s):

PLANNING APPLICATION- NO COSTS TO TOWNSHIP

File # _____

_____, hereby recognize(s) that the The owner(s), deposit made on this application will be used to process said application, and further, agree(s) to pay any additional costs as may be necessary, as set out in the current Tariff of Fees By-Law of the Township. The fee for processing planning applications will be an amount equal to the amount incurred by the Township. Costs incurred by the Township and/or Committee of Adjustment shall include but not be limited to internal administration fees, notice publication, legal and professional consultation (if applicable), and Ontario Municipal Board fees and costs for planning / legal counsel (if applicable).

All costs incurred by the Township shall be the responsibility of the property owner(s)

Date: _____ Signature of Owner(s): _____