



APPLICATION FOR AMENDMENT TO ZONING BY-LAW No. 2015-44 or OFFICIAL PLAN No. 2015-27

PLEASE CHECK (✓) APPROPRIATE BOX

- OFFICIAL PLAN** **FEE \$1500**
- RESTRICTED AREA (ZONING) BY-LAW** **FEE \$1500**

THE CORPORATION OF THE TOWNSHIP OF DUBREUILVILLE IN THE DISTRICT OF ALGOMA

FOR OFFICE USE ONLY	
Application Number: _____ Date of Submission: _____ Checked by: _____ Date of acceptance: _____	
OFFICIAL PLAN POLICIES: _____	
EXISTING ZONING: _____ PROPOSED ZONING: _____	
PERTINENT RESTRICTIONS AND REMARKS: _____	
CONNECTED SERVICES: WATER <input type="checkbox"/> SANITARY SEWER <input type="checkbox"/> STORM SEWER <input type="checkbox"/> WELL <input type="checkbox"/> SEPTIC <input type="checkbox"/>	
GENERAL COMMENTS: _____	
NAME OF REGISTERED OWNER	NAME OF AGENT/APPLICANT
ADDRESS	ADDRESS
TELEPHONE NO.	TELEPHONE NO.
EMAIL	EMAIL
NAME AND ADDRESS OF THE HOLDERS OF ANY MORTGAGES, CHARGES OR OTHER ENCUMBRANCES	
DESCRIPTION OF LAND TO WHICH THIS APPLICATION APPLIES	
STREET AND CIVIC ADDRESS: _____	
LOT NO.: _____	REGISTERED PLAN NO.: _____
TOWNSHIP LOT: _____	CONCESSION NO.: _____
CLAIM NO.: _____	PART NO.: _____
PART "IR" NO: _____	
NOTE: A legal survey plan or a property plan accurately drawn to scale will be required when the application is submitted.	
WATER SUPPLY : PIPED MUNICIPAL <input type="checkbox"/> OTHER (SPECIFY) <input type="checkbox"/> _____	
SEWAGE DISPOSAL : PIPED MUNICIPAL <input type="checkbox"/> OTHER (SPECIFY) <input type="checkbox"/> _____	
STORM DRAINAGE : SEWER <input type="checkbox"/> OTHER (SPECIFY) <input type="checkbox"/> _____	
ACCESS : MUNICIPAL ROAD <input type="checkbox"/> OTHER (SPECIFY) <input type="checkbox"/> _____	
DATE SUBJECT LAND ACQUIRED: _____ DATE EXISTING BUILDINGS ON LAND CONSTRUCTED: _____	
IF KNOWN, HAS THE SUBJECT LAND EVER BEEN SUBJECT TO AN OFFICIAL PLAN OR ZONING BY-LAW AMENDMENT? _____	
DIMENSIONS OF LAND AFFECTED	
FRONTAGE: (METRES) _____	AVERAGE WIDTH: (METRES) _____
AVERAGE DEPTH: (METRES) _____	AREA: (METRES) _____ (HECTARES) _____
LAND USE	
EXISTING USES (IF ANY): _____	
PROPOSED USE OF LAND: _____	
ADJACENT LAND USE: _____	
CURRENT OFFICIAL PLAN DESIGNATION: _____ CURRENT ZONING: _____	
PROPOSED DEVELOPMENT	
1. RESIDENTIAL INFORMATION (if applicable)	
Building Type (eg. single-detached) _____	NUMBER OF UNITS: _____
NUMBER OF STOREYS: _____	GROUND FLOOR AREA: (m2) _____
TYPE AND NUMBER OF UNITS:	
BACHELOR <input type="checkbox"/>	1-BEDROOM <input type="checkbox"/>
2-BEDROOM <input type="checkbox"/>	3-BEDROOM <input type="checkbox"/>
4-BEDROOM <input type="checkbox"/>	
NUMBER OF PARKING SPACES: SURFACE: _____ UNDERGROUND: _____ (See Zoning By-law for requirements)	
REASON(S) WHY THE AMENDMENT IS REQUESTED: _____	
NATURE AND EXTENT OF THE AMENDMENT REQUESTED: _____	
2. COMMERCIAL & INDUSTRIAL INFORMATION (if applicable)	
DIMENSION OF BUILDING: _____	TOTAL FLOOR AREA (ALL FLOORS): _____
NUMBER OF PARKING SPACES: _____	
REASON(S) WHY THE AMENDMENT IS REQUESTED: _____	
NATURE AND EXTENT OF THE AMENDMENT REQUESTED: _____	
PLAN REQUIRED: IT WILL BE NECESSARY TO SUBMIT PRELIMINARY CONCEPT PLANS FOR THE DEVELOPMENT AT THE TIME OF THE FILING OF THIS APPLICATION.	

_____ Date

_____ Signature of Applicant

Personal information contained on this form, collected pursuant to the *Planning Act*, will be used for the purpose of responding to the initial application. Questions should be directed to the Freedom of Information and Privacy Co-ordinator at the institution where the request was made.

The applicant/Agent shall attach to the copy of his/her application, a Plan showing the following information:

1. The boundaries and dimensions of the subject land.
2. The location, size and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the front yard lot line, rear yard lot line and side yard lot lines.
3. The approximate location of all natural and artificial features on the subject land and on land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application. Examples include buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells and septic tanks.
4. The current uses on land that is adjacent to the subject land.
5. The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, or a private road or a right of way.
6. If access to the subject land is by water only, the location of the parking and docking facilities to be used.
7. The location and nature of any easement affecting the subject land.

When required by the Clerk of the Township of Dubreuilville, the plan mentioned in Section 1, shall be signed by an Ontario Land Surveyor.

Note: Where a proposal will utilize a private water supply and/or sewage disposal system, written approval by the District Health Unit and/or the Ministry of the Environment must be obtained before amendment will be passed by Council.

All communication regarding this Application should be directed to the following:

Name:	_____
Firm:	_____
Address:	_____
Telephone No.:	_____
Email:	_____

Note: If an Agent, written authorization of the Owner must accompany the application. 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 thereto.

I/We enclose herewith the application to amend the Official Plan and/or the Zoning By-Law of the Township of Dubreuilville, and application is accompanied by a filing fee of \$_____ which is paid for in cash or cheque made payable to: "The Corporation of the Township of Dubreuilville". I/we understand that the filing fee is not refundable, and I/We agree to pay any further and other costs and expenses which are determined by Council to relate specifically and directly to my/our application to amend the Official Plan and/or the Zoning By-Law of the Township of Dubreuilville, and I/We agree to pay such costs and expenses on receipt of written request from the Clerk of the Township of Dubreuilville.

I/We _____ the undersigned solemnly declare that all of the above statements and the statements contained in all of the exhibits transmitted herewith are 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.

_____	_____
Date	Signature of applicant or authorized agent
_____	_____
Clerk and/or Witness	Signature of applicant or authorized agent

24.0 UNDERTAKING FOR ONTARIO MUNICIPAL BOARD APPEAL

TO: Corporation of the Township of Dubreuilville

FROM: Name _____

Address _____

SUBJECT: Application for Official Plan Amendment or Zoning By-law Amendment

ADDRESS OF SITE: _____

Where the Township of Dubreuilville substantially supports the application for [Official Plan Amendment or Zoning By-law Amendment,

NAME OF APPLICANT: _____

Hereby undertakes to pay, in accordance with the Ontario Municipal Board cost recovery policy of the Corporation of the Township of Dubreuilville By-law 2023-24, upon receipt of invoice from the Township, any and all legal costs, including all disbursements of the Township, to an upset limit of \$10,000 in respect of preparation for and attendance at an Ontario Municipal Board hearing, until the matter is finally resolved by the said Board.

It is hereby acknowledged that "hearing" shall include all attendances before the Board in respect of the said application whether in person, telephone conference call, or other means as directed by the Board.

Dated at the Dubreuilville this _____ day of _____, 20_____

Please complete 1 or 2

1. For Applicant and individuals

2. For Corporations and Companies

SIGNATURE OF APPLICANT

(PLEASE PRINT NAME)

SIGNATURE OF WITNESS

(PLEASE PRINT NAME)

CORPORATE NAME (IF APPLICABLE)

(AUTHORIZED SIGNATURE) I HAVE THE AUTHORITY TO BIND THE CORPORATION

(PLEASE PRINT NAME AND TITLE)