



THE CORPORATION OF THE TOWNSHIP OF DUBREUILVILLE
Application for Site Plan Control
 Section 41 of the Planning Act

<u>Site Plan Control Fees</u>	
Other than Residential	\$1,500
Residential (<i>under 7 units</i>)	\$1,500
<i>(7+ units)</i>	\$1,500
Deposit (<i>as required by the Township</i>)	\$ 500

This application is based upon the following representation of fact which the Applicant/Agent certifies to be true. Please complete this application and the last page attached. Please PRINT clearly.

SECTION 1: General Information - To be completed in full

1.1 Registered Owner

Name: _____

Principal of Company (If Owner is a Company): _____

Address: _____

Postal Code: _____ Email Address: _____

Telephone No.: _____ Cellular No. : _____

Fax No.: _____ Website Address: _____

1.2 Applicant/Agent – If other than the registered Owner, written authorization from registered Owner must accompany this application – see Section 9 – Authorizations in this form.

Name: _____

Principal of Company (If Owner is a Company): _____

Address: _____

Postal Code: _____ Email Address: _____

Telephone No.: _____ Cellular No. : _____

Fax No.: _____ Website Address: _____

Contact for correspondence:
 Owner Applicant/Agent All

NOTE: Unless otherwise requested, all correspondence will be sent to the Applicant.

SECTION 2: Location of the Subject Land

2.1 Municipal Address: _____

Municipal Roll Number: _____

Concession Number(s)	Lot Number(s)	Registered Plan No.	Lot(s) and/or Block(s)
Reference Plan No.	Part Number (s)	Parcel and PIN Number	

2.2 Are there any easements, rights-of-way, or restrictive covenants affecting the subject land(s)?
 Yes No

If yes, please provide a copy of the easement or covenant and describe same below.

SECTION 3: Description of the subject land(s) and servicing information

3.1 Description	Frontage (m) Depth (m) Area (sq. metres/ha)	
3.2 Use of Property	Existing Use(s) Proposed Use(s)	
3.3 Access (check the appropriate space)	<input type="checkbox"/> Provincial Highway <input type="checkbox"/> Municipal road, maintained all year <input type="checkbox"/> Municipal road, maintained seasonally	<input type="checkbox"/> Other public road <input type="checkbox"/> Right of way* * please provide copy of legal documents

If access to the subject land is by private road, or if “other public road” or “right of way” was indicated in Section 3.3, indicate ownership of the land or road, responsibility for its maintenance and whether it is maintained seasonally or all year.

**If access to the subject land is from a provincial highway, please contact the Ministry of Transportation of Ontario to determine status of an entrance permit. Please provide a copy of the documentation permitting the entrance.

3.4 Potable Water Supply (font size changed)	<input type="checkbox"/> <i>Municipal owned and operated piped water system</i> <input type="checkbox"/> <i>Privately owned and operated individual well</i> <input type="checkbox"/> <i>Privately owned and operated communal well</i>	<input type="checkbox"/> <i>Lake or other water body</i> <input type="checkbox"/> <i>Other means (please explain):</i>
3.5 Sewage Disposal	<input type="checkbox"/> <i>Municipal owned and operated sanitary sewage system</i> <input type="checkbox"/> <i>Privately owned and operated individual septic system*</i> <input type="checkbox"/> <i>Privately owned and operated communal septic system*</i>	<input type="checkbox"/> <i>Other means* (please explain):</i> <i>*Provide a copy of the current certificate of approval</i>
3.6 Other services	<input type="checkbox"/> <i>Electricity</i> <input type="checkbox"/> <i>School bussing</i> <input type="checkbox"/> <i>Garbage collection</i>	

3.7 List the new service connections that are expected to be required for the proposed development and sizes.

3.8 The Applicant may be required to obtain additional permits, or approvals from the Ministry of the Environment or the Algoma Public Health.

SECTION 4: LAND USE

4.1 Indicate the Official Plan designation(s) of the subject lands: _____

4.2 Indicate the applicable zone(s) of the Zoning By-law of the subject lands: _____

4.3 Has the property ever been used for commercial or industrial purposes: Yes No

** If yes, provide a record of site condition, or brief history of the use of the property. There may be a requirement for submission of additional environmental assessment information.

SECTION 5: ADDITIONAL INFORMATION FOR COMMERCIAL & INDUSTRIAL DEVELOPMENT

	Existing	Proposed	Total
Gross/Total Floor Area			m ²
Building Height			m
Gross leasable commercial space for convenience retail			m ²
Gross floor area for office use			m ²

	Existing	Proposed	Total
Gross floor area for general retail			m ²
Gross floor area for restaurant use			m ²
Gross floor area for warehouse/wholesale space			m ²
No. of on-site parking stalls			
No. of boat slips			
No. of on-site loading spaces			
Gross area of seasonal outdoor space			m ²
No. of service bays for vehicle/equipment/marine servicing			

SECTION 6: ADDITIONAL INFORMATION FOR RESIDENTIAL DEVELOPMENT

	Existing	Proposed	Total
No. of dwelling units			
Gross/total floor area			m ²
Building height			
No. of storeys			
No. of on-site parking stalls			m

SECTION 7: ADDITIONAL INFORMATION FOR INSTITUTIONAL DEVELOPMENT (Places of Worship, schools, health care facilities etc.)

	Existing	Proposed	Total
Total Floor Area			m ²
Building height			m
Height of tower/spire/steeple			m
No. of on-site parking stalls			
No. of on-site loading spaces			
Seating capacity- Church			
No. of classrooms (education/church use)			

SECTION 8: ADDITIONAL INFORMATION FOR NON-STRUCTURAL DEVELOPMENT (Parking lots, recreational fields, parks etc.)

	Existing	Proposed	Total
Dimensions & area			
Cover material (asphalt/gravel/turf)			
Location and type of lighting			
Type of plumbing (irrigation, drinking fountains etc.)			

SECTION 9: AUTHORIZATIONS

9.1 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.

Authorization of Owner for Agent to Make the Application

I, _____, am the Owner of the land that is the subject of this application and I authorize _____ to make this application on my behalf.

Date

Signature of Owner

9.2 If the Applicant is not the owner of the land that is the subject of this application, complete the authorization of the owner concerning personal information set out below.

Authorization of Owner for Agent to Provide Personal Information

I, _____, am the Owner of the land that is the subject of this application for the purposes of the **Freedom of Information and Protection of Privacy Act**,

I authorize _____, as my Agent for this application, to provide any of my personal information that will be included in this application or collected during the processing of the application.

Date

Signature of Owner

SECTION 10: CONSENT OF THE OWNER

10.1 Complete the consent of the owner concerning personal information set out below.

Consent of the Owner to the Use and Disclosure of Personal Information

I, _____, am the Owner of the land that is the subject of this Site Plan Control application and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I 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.

Date

Signature of Owner

SECTION 11: AFFIDAVIT OR SWORN DECLARATION *(To be completed in front of "Commissioner of Oaths" only)*

Affidavit or Sworn Declaration for the Prescribed Information

I, _____ of the _____

in the _____ 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 in respect of the above sections is true.

Sworn (or declared) before me

at the _____

in the _____

this _____ day of 20_____

Commissioner of Oaths

Applicant

SECTION 12: Affidavit or Sworn Declaration for Requested Information

I, _____ of the _____

in the _____ 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 in respect of the above sections is true.

Sworn (or declared) before me

at the _____

in the _____

this _____ day of 20_____

Commissioner of Oaths

Applicant