

COMMITTEE OF ADJUSTMENT APPLICATION FOR MINOR VARIANCE (ZONING)

COMPLETENESS OF THIS APPLICATION

A formal Pre-Submission Consultation Meeting with the Township staff is **mandatory** prior to submission of this application.

The prospective applicant shall pay the Township of Wellesley the **prescribed, non-refundable pre-submission consultation meeting fee of \$100.00**, payable to the Township of Wellesley, prior to the pre-submission consultation meeting.

Applications must be accompanied by the submission requirements in order to be considered complete. **This application will not be accepted in the absence of a Formal Record of Pre-Submission Consultation** issued by the Township of Wellesley. Through the Pre-Submission Consultation, other information and material (e.g. technical information or reports) may be required to assist the Township and other agencies in their planning evaluation of the proposed minor variance.

This application will not be considered complete in the absence of any material specified in the Record of Pre-Submission Consultation. **Incomplete applications will not be processed** until all information is provided. If the information, including copies of the required plans and the applicable fees are not provided, the Township may return the application or refuse to give the application further consideration until receipt of all the required information and fees have been provided.

DEPOSITS/FEES

The completed **Minor Variance** application must be accompanied by the prescribed deposits of **\$1,300.00** (\$800.00 minimum to be deducted for Administration & Planning Fees) payable to the Township of Wellesley.

The applicant is responsible for 100% of ALL third-party expense incurred by the Township of Wellesley associated with this application – including but not necessarily limited to advertising, engineering, administrative and legal expenses).

Please note the application will not be accepted for processing until the deposits are received.

MINOR VARIANCE APPLICATION PROCESS

An application for a Minor Variance generally requires **approximately three (3) to five (5) months** to process. This procedure generally encompasses the following steps:

1. The application is reviewed by planning staff to ensure all prescribed information and the required fee has been provided. **Within thirty (30) days** of the receipt of an application, the applicant will be notified in writing, whether the application is considered “complete”.
2. Following the circulation period, a staff report containing a recommendation and any conditions of approval, if required, will be formulated.
3. At the public meeting, opportunity is afforded to the applicant and any other interested parties to make verbal and/or written submissions concerning the Minor Variance application. The Township Committee of Adjustment may choose to approve, refuse or defer the application.
4. If approved, a notice of passing of the decision is given to property owners and various public agencies and there is a **20 day appeal period** commencing the day after this further notice is given in which an appeal may be made to the Ontario Municipal Board. Should no appeal be lodged, the minor variance is final and binding.

SECRETARY-TREASURER OF THE COMMITTEE OF ADJUSTMENT
CONTACT INFORMATION

Kaitlyn Werth
4639 Lobsinger Line RR1
St Clements, ON NOB 2M0
Office: (519) 699-3946
Fax: (519) 699-4540
kwerth@wellesley.ca

OFFICE USE ONLY

Application #: A	Date application and deposit received:
Was there a Pre-Submission Meeting with staff? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of Pre-Submission Meeting:	Application deemed complete: <input type="checkbox"/> Yes <input type="checkbox"/> No Date Application was deemed to be complete:

TO BE COMPLETED BY APPLICANT
(Please type or print neatly in blue or black ink)

CONTACT INFORMATION
MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT
Personal Information on this form is collected under authority of *The Planning Act* and will be used to process this application

All correspondence will be directed to the Agent (if any), unless otherwise requested.

Registered Owner

Name:		
Principal of Company (if Owner is a Company):		
Mailing Address:		
Phone	Ext.	Fax:
Alternate phone:	Email:	

Agent (If other than the registered owner)

Name/Primary Contact Person:		
Mailing Address:		
Phone:	Ext.	Fax:
Alternate phone:	Email:	

All persons or institutions who have any mortgage charge or encumbrance on the property

Name:		
Mailing Address:		

SUBJECT PROPERTY

Municipal Address:
Legal Description:
Roll No.:

Lot Area:	Frontage:	Depth:
<p>Are there any existing easements or restrictive covenants affecting the subject land? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do not know</p> <p>If YES, provide plan/legal documentation if applicable.</p>		
DESCRIPTION OF REQUEST		
<p>Nature and extent of relief applied for (What do you want to do versus what is allowed)?</p>		
EXPLANATION OF REQUEST		
<p>Why is it not possible to comply with the By-law? Reasons why this request should be approved (planning justification):</p>		
SURROUNDING LAND USES		
<p>Describe the land uses on the surrounding properties. How will the surrounding properties be affected? Provide as much detail as possible.</p>		

DESCRIPTION OF SUBJECT PROPERTY	
Official Plan Designation:	
Zoning:	
Current and proposed use of Property:	
Length of time existing use has continued (if known):	
BUILDINGS / STRUCTURES (if applicable)	
Existing	Dimensions:
	Ground Floor Area: Gross Floor Area
	Setbacks from lot lines:
	Front:
	Rear:
	Sides:
	Height: No. of Storeys:
Proposed	Dimensions:
	Ground Floor Area: Gross Floor Area
	Setbacks from lot lines:
	Front:
	Rear:
	Sides:
	Height: No. of Storeys:
Please use back of page if more space is required	
SERVICES	
Sewage Disposal	Water Supply
✓ <i>Service Type</i>	✓ <i>Service Type</i>
Public owned and operated piped sewage system	Public owned and operated water system
Privately owned and operated individual septic system(s)	Privately owned and operated well
Other (describe):	Other (describe):
Do not know	Do not know
Stormwater Drainage	Access
✓ <i>Service Type</i>	✓ <i>Service Type</i>
Sewers	Provincial Highway
Ditches or Swales	Regional Road
SWM Pond	Township Road

Infiltration Trenches		Water
Other (describe):		Other (describe):
Do not know		Do not know

OTHER APPLICATIONS

Has the subject land ever been the subject of a Planning Act application(s), such as other minor variance, consent, Zoning By-law amendment, etc.)?

YES NO

If YES, provide the file number and status of each application:

PLEASE REVIEW CHECKLIST ON THE FOLLOWING PAGE

SUBMISSION CHECKLIST

Have you pre-consulted with a Township Planner regarding this application?

Deposits:

\$1,300.00 – payable to the Township of Wellesley
 - Administration & Planning Fees (to be deducted from deposit): \$800.00 min

The applicant is responsible for 100% of ALL third-party expense incurred by the Township of Wellesley associated with this application – including but not necessarily limited to advertising, engineering, administration and legal expenses).

Application:

- The original of the completed and signed application form;
- The signed Record of Pre-Submission Consultation;
- Hard copies of all information and materials(including plan/diagram) required to be provided with the initial submission pursuant to the Record of Pre-Submission Consultation;
- Electronic copies (.pdf) of all information and materials (including plan/diagram) required to be provided with the initial submission pursuant to the Record of Pre-Submission Consultation.

THE RECORD OF PRE-SUBMISSION WILL INDICATE HOW MANY COPIES ARE REQUIRED.

Plan:

The Planning Act regulations require that the plans, drawings or survey be to scale and show the following information. It is very important to be as accurate as possible – **should deficiencies be found, you may be required to re-apply.**

- The boundaries and accurate dimensions of the subject land
- The size, location and type of all existing and proposed buildings, structures or additions on the subject land, measured from the front, rear and side lot lines
- The location of all driveways and parking spaces
- The location, width and name of any roads within or abutting the subject land
- Identify any natural features on subject land (trees, streams, etc.)
- All measurements must be shown in metric.**

Note:

- Where possible, application forms should be submitted in person to the Planning Dept. at the Township of Wellesley, 4639 Lobsinger Line, St. Clements, ON, N0B 2M0
 - This will allow the application to be reviewed with staff to identify any possible issues or further information required, therefore avoiding unnecessary delays during processing.

- This is **YOUR** application - make sure that you know the exact details of why you are applying. It is your responsibility to provide a complete and accurate application. Staff are available for consultation, but are not permitted to complete the form.
- An application will not be accepted as complete unless all legislated requirements have been met, and will not be processed until all necessary information has been received.
- In addition to the submission requirements found on the application form, **it is imperative that the applicant provide all the planning evidence necessary in support of the request being made.** This will assist the Committee in making an informed decision regarding your application.
- The owner or agent **must** attend the Committee of Adjustment meeting in support of their application.

ACKNOWLEDGEMENT

I/We understand that receipt of this application by the Township of Wellesley does **not** guarantee it to be a 'complete' application. Further review of the application will be undertaken and I/We may be contacted to provide additional information and/or resolve any discrepancies or issues with the application as submitted. Once the application is deemed to be fully complete, the application deposit will be deposited and the application will go forward to the next possible Committee of Adjustment meeting.

Submission of this application constitutes consent for authorized municipal staff to enter upon the subject property for the purpose of conducting site visits, including photographs, which are necessary for the evaluation of this application.

Name of Owner:

Name of Owner:

Signature of Owner:

Signature of Owner:

Date:

Date:

AFFIDAVIT

(to be completed in person in the presence of a Commissioner of Oaths)

I/We, _____ of _____ in the
Name City/Township
 County/Regional Municipality of _____, solemnly declare that all of
 the above statements contained in the application 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*.

Signature of Applicant

Signature of Applicant

Declared before me at the

_____ in the County/Regional Municipality of
City/Township
 _____ this _____ day of _____, 20____

Commissioner of Oaths

AUTHORIZATION

If this application is being made by an agent/solicitor on behalf of the property owner, the following
 authorization must be completed:

I/We _____ hereby authorize
Owner(s)
 _____ to act on my behalf in regard to the above application.
Agent

Signature of Owner(s)

Name of Witness

Signature of Witness

Grand River Conservation Authority (GRCA)

The GRCA has implemented user fees for review of development applications. In this regard, you may
 be assessed a plan review fee if the property to which your application applies is within the GRCA's
 area of interest

Please contact the GRCA for more information if required, toll-free at 1-866-900-4722.