

THE CORPORATION OF THE TOWNSHIP OF WHITEWATER REGION
APPLICATION FOR OFFICIAL PLAN AND/OR ZONING BY-LAW AMENDMENT
GUIDELINES

Introduction: The submission of an application to the Municipality to amend the Official Plan or Zoning By-law is provided for in the Ontario Planning Act. As such, this form must be completed and accompanied with the required fee prior to consideration by Council. The purpose of these Guidelines is to assist persons in completing the application to amend the Official Plan or Zoning By-law. Should you require clarification on any matter covered by this application form, please contact the Municipal Office at the address at the bottom of this page. For a complete reference to the Official Plan and Zoning By-law process, please consult the Planning Act.

Application Fees: Each application must be accompanied by the application fee in the form of a cheque payable to the **Township of Whitewater Region**. Please be advised that the Municipality may have a tariff of fees by-law which provides for the payment of additional fees, if applicable.

Fees: \$700.00 Zoning By-law Amendment
\$900.00 Official Plan Amendment

Copies: Two (2) copies of this application, including the sketch or schedule and other information as may be specified, shall be required.

Authorization: If the applicant is not the owner of the subject land, a written statement by the owner must accompany the application which authorizes the applicant to act on behalf of the owner as it relates to the subject application (See Part V, page 4).

Proposed Schedule/Sketch: All applications for Official Plan Amendments must include the proposed Schedule, if the Schedule to the Official Plan is to be changed or replaced. All applications for a rezoning must include an accurate sketch, preferably prepared by a qualified professional, showing the items listed (see Question 35, page 3).

Supporting Information: Please bear in mind that additional information may be required by the municipality, County, local and provincial agencies in order to evaluate the proposed amendment. This information is often a requirement of the local Official Plan, Provincial policies and/or applicable regulations. The required information may include studies or reports to deal with such matters as environmental impacts, traffic, water supply, sewage disposal and storm water management.

In addition, the applicant may be required to submit a more detailed site plan, under site plan control, prepared by a qualified professional, showing the proposed development including all new buildings and structures, parking areas, landscaping and other site information as required by the municipality.

The Schedule to Ontario Regulation 543/06 outlines "prescribed" information for an Official Plan Amendment. The Schedule to Ontario Regulation 545/06 outlines "prescribed" information for a Zoning By-law Amendment.

Approval Process: After the submission of an application, the Clerk will determine if the application is complete, including whether all of the information prescribed by the Ontario Regulation(s) and the required fee have been provided. If the application is complete, the Clerk will deem the application to be received. The applicant/owner will be notified whether the application is complete or whether more information is required.

Upon receipt of a complete application, the required fee and such other information as may be required, Council will determine whether there is sufficient merit in processing the application further (i.e. the circulation of notice and the holding of at least one public meeting as required by the Ontario Planning Act). The applicant will be encouraged to attend a public meeting, to present the proposal. The applicant will be provided notice of any decision made by Council concerning the application. Amendments to the County of Renfrew OP are adopted by County Council and approved by the Province of Ontario. Amendments to local Official Plans are adopted by Council and then forwarded to the County of Renfrew for approval.

Please be advised that the Planning Act provides for appeal procedures in respect of Official Plan and Zoning By-law Amendments.

Further Information:

Clerk's Name: Robert H.A. Tremblay

Municipality: Township of Whitewater Region

Address: 44 Main Street, P.O. Box 40, Cobden, ON K0J 1K0

Phone: 613-646-2282 or 1-877-646-2282 Fax: 613-646-2283

Office Hours: Monday to Friday 8:30 – 4:00 p.m.

TOWNSHIP OF WHITEWATER REGION

Application For Official Plan And/Or Zoning By-Law Amendment

Note: The "*" identifies prescribed information for Official Plan Amendments outlined in Ontario Regulations 543/06; the "+" identifies prescribed information for Zoning By-law Amendments outlined in Ontario Regulation 545/06. Until Council has received the prescribed information and material, Council may refuse to accept or further consider this application.

PART I GENERAL INFORMATION

1. TYPE OF AMENDMENT

Official Plan [] Zoning By-law [] Both []

2. APPLICANT/OWNER INFORMATION

a) *+ Applicant's Name(s):

*+ Address:

*+ Phone #: Home: () Work: () Fax: ()

b) The applicant is: [] the registered owner [] an agent authorized by the owner

c) If the applicant is an agent authorized by the owner, please complete the following:

+ Name of Owner:

+ Address of Owner:

+ Phone #: Home: () Work: () Fax: ()

d) To whom should correspondence be sent? [] Owner [] Applicant [] Both

e) + If known, if there are any holders of any mortgages, charges or other encumbrances on the subject land, please provide details as follows:

Name: _____ Address: _____

Name: _____ Address: _____

3. *+PROVIDE A DESCRIPTION OF THE SUBJECT LAND

Street Address:

Municipality: _____ Geographic Twp: _____ Concession: _____

Lot: _____

Registered Plan No.: _____ Block or Lot No(s). in the Plan: _____

Reference Plan No.: _____ Part No(s).: _____

4. *+CURRENT DESIGNATION OF THE SUBJECT LAND IN THE OFFICIAL PLAN (IF ANY):

PART II OFFICIAL PLAN AMENDMENT (Proceed to PART III, if an Official Plan Amendment is not proposed)

5. *NAME OF OFFICIAL PLAN TO BE AMENDED:

6. *NAME OF MUNICIPALITY REQUESTED TO INITIATE PLAN AMENDMENT: _____

7. *DATE THE REQUEST FOR OFFICIAL PLAN AMENDMENT WAS MADE:

8. *LAND USES AUTHORIZED BY THE CURRENT DESIGNATION:

9. DOES THE PROPOSED OFFICIAL PLAN AMENDMENT DO THE FOLLOWING?

- *Change a policy in the Official Plan Yes (go to question #10) No
- *Replace a policy in the Official Plan Yes (go to question #10) No
- *Delete a policy in the Official Plan Yes (go to question #10) No
- *Add a policy in the Official Plan Yes (go to question #11) No
- *Change or replace a designation in the Official Plan Yes (go to question #12) No
- *Alter any boundary of, or establish a new settlement area Yes (go to question #13) No
- *Remove the subject land from an employment area Yes (go to question #14) No

10. *SECTION NUMBER(S) OF POLICY TO BE CHANGED, REPLACED OR DELETED:

11. *PURPOSE OF THE PROPOSED AMENDMENT, IF A POLICY IS TO BE CHANGED, REPLACED, DELETED OR ADDED:

12. *DESIGNATION TO BE CHANGED OR REPLACED:

13. *SECTION NUMBER(S) OF POLICY DEALING WITH THE ALTERATION OR ESTABLISHMENT OF A SETTLEMENT AREA: _____

14. *SECTION NUMBER(S) OF POLICY DEALING WITH THE REMOVAL OF LAND FROM AN EMPLOYMENT AREA: _____ Not Applicable

15. *INDICATE HOW WATER IS SUPPLIED AND HOW SEWAGE DISPOSAL IS PROVIDED TO THE SUBJECT LAND:

- | WATER | | SEWAGE | |
|--------------------------|--|--------------------------|--|
| <input type="checkbox"/> | Publicly owned and operated piped system | <input type="checkbox"/> | Publicly owned and operated piped sanitary sewage system |
| <input type="checkbox"/> | Privately owned and operated individual well | <input type="checkbox"/> | Privately owned and operated communal septic system |
| <input type="checkbox"/> | Privately owned and operated communal well | <input type="checkbox"/> | Privately owned and operated communal individual septic system |
| <input type="checkbox"/> | Lake or other water body | <input type="checkbox"/> | Privy |
| <input type="checkbox"/> | Other means: | <input type="checkbox"/> | Other means: |

16. *IF THE PROPOSED DEVELOPMENT IS SERVICED BY A PRIVATELY OWNED AND OPERATED INDIVIDUAL OR COMMUNAL SEPTIC SYSTEM, WILL THE COMPLETED DEVELOPMENT PRODUCE MORE THAN 4500 LITRES OF EFFLUENT PER DAY?
 Yes No

IF YES, THE FOLLOWING PROFESSIONALLY PREPARED REPORTS ARE REQUIRED TO BE SUBMITTED WITH THIS APPLICATIONS:

- Servicing Options Report
- Hydrogeological Assessment with Nitrate Impact Assessment

17. *IS THE REQUESTED AMENDMENT CONSISTENT WITH THE POLICY STATEMENTS ISSUED UNDER SECTION 3(1) OF THE PLANNING ACT?
 Yes No

18. *APPROXIMATE AREA OF LAND COVERED BY THE PROPOSED AMENDMENT (IF APPLICABLE & IF KNOWN):

19. *LAND USES THAT WOULD BE AUTHORIZED BY THE PROPOSED AMENDMENT:

20. *HAS THE APPLICANT APPLIED FOR APPROVAL OF ANY OF THE FOLLOWING FOR THE SUBJECT LAND OR FOR LAND WITHIN 120 METRES OF THE SUBJECT LAND?

- | | | |
|-------------------------|------------------------------|-----------------------------|
| Official Plan Amendment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Zoning By-law Amendment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Minor Variance | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Plan of Subdivision | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Consent (Severance) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Site Plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Minister's Zoning Order | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

21. *IF THE ANSWER TO QUESTION 20 IS YES, PLEASE PROVIDE THE FOLLOWING INFORMATION, IF KNOWN:

File No. of Application:

Name of Approval Authority:

Lands Affected by the Application:

Purpose of Application:

Status of Application:

Effect of that Application on the proposed Plan Amendment:

22. *PLEASE ATTACH THE TEXT OF THE PROPOSED AMENDMENT ON A SEPARATE PAGE, IF A POLICY IS BEING CHANGED, REPLACED, DELETED OR ADDED.

23. *PLEASE ATTACH THE PROPOSED (MAP) SCHEDULE AND THE ACCOMPANYING TEXT, IF THE PROPOSED AMENDMENT CHANGES OR REPLACES A (MAP) SCHEDULE.

PART III ZONING BY-LAW AMENDMENT (Proceed to PART IV, if a Zoning By-law Amendment is not proposed)

24. +WHAT IS THE CURRENT OFFICIAL PLAN DESIGNATION OF THE SUBJECT LAND?

25. +HOW DOES THE ZONING AMENDMENT REQUESTED CONFORM TO THE OFFICIAL PLAN?

26. +IS THE REQUESTED AMENDMENT CONSISTENT WITH THE POLICY STATEMENTS ISSUED UNDER SECTION 3(1) OF THE PLANNING ACT?

Yes No

27. +WHAT IS THE CURRENT ZONING OF THE SUBJECT LAND?

28. +PLEASE STATE THE NATURE AND EXTENT OF THE REZONING REQUESTED:

29. +WHAT IS THE REASON WHY THE REZONING IS REQUESTED?

30. +IS THE SUBJECT LAND IN AN AREA WHERE MINIMUM AND MAXIMUM DENSITY REQUIREMENTS APPLY? Yes No

IF YES, WHAT ARE THE DENSITY REQUIREMENTS? _____

31. +IS THE SUBJECT LAND IN AN AREA WHERE MINIMUM AND MAXIMUM HEIGHT REQUIREMENTS APPLY? Yes No

IF YES, WHAT ARE THE HEIGHT REQUIREMENTS? _____

32. +DOES THE REQUESTED AMENDMENT ALTER OR IMPLEMENT A NEW SETTLEMENT AREA? Yes No

IF YES, PROVIDE DETAILS OF THE OFFICIAL PLAN OR OFFICIAL PLAN AMENDMENT THAT DEALS WITH THIS MATTER:

33. +DOES THE REQUESTED AMENDMENT REMOVE LAND FROM AN EMPLOYMENT AREA? Yes No Not Applicable

+IF YES, PROVIDE DETAILS OF THE OFFICIAL PLAN OR OFFICIAL PLAN AMENDMENT THAT DEALS WITH THIS MATTER:

34. **+IS THE SUBJECT LAND WITHIN AN AREA WHERE ZONING WITH CONDITIONS MAY APPLY?**
 Yes No Not Applicable

+IF YES, PROVIDE DETAILS OF HOW THE APPLICATION CONFORMS TO THE OFFICIAL PLAN POLICIES RELATING TO ZONING WITH CONDITIONS: _____

35. **+DIMENSIONS OF THE SUBJECT LAND:**

Frontage: _____ Depth: _____ Area: _____

36. **+PLEASE MARK BELOW THE ACCESS TO THE SUBJECT LAND:**

Provincial Highway Municipal Road Maintained Year-round Municipal Road Maintained Seasonally
 Right of Way Water Other:

37. **+IF THE ONLY ACCESS IS BY WATER, PLEASE STATE BELOW THE PARKING AND DOCKING FACILITIES THAT ARE TO BE USED, AND THE DISTANCE OF THESE FACILITIES FROM THE SUBJECT LAND AND FROM THE NEAREST PUBLIC ROAD:**

38. **+WHAT ARE THE EXISTING USES OF THE SUBJECT LAND AND IF KNOWN, HOW LONG HAVE THEY CONTINUED?**

#1 _____ Since: _____/_____/_____ years
 #2 _____ Since: _____/_____/_____ years

39. **+ARE THERE ANY BUILDINGS OR STRUCTURES ON THE SUBJECT LAND?** Yes No

40. **+IF KNOWN, WHEN WAS THE SUBJECT LAND ACQUIRED BY THE CURRENT OWNER?**

41. **+WHAT ARE THE "PROPOSED" USES OF THE SUBJECT LAND?**

42. **+WILL ANY BUILDINGS OR STRUCTURES BE BUILT ON THE SUBJECT LAND?** Yes No

43. **+PROVIDE THE FOLLOWING DETAILS FOR ALL EXISTING OR PROPOSED BUILDINGS OR STRUCTURES ON THE SUBJECT LAND (use a separate page if necessary):**

	EXISTING			PROPOSED	
Type of building or structure					
Setback from the front lot line					
Setback from the rear lot line					
Setbacks from the side lot lines					
Height (in meters)					
Dimensions or floor area					
Date constructed, if known					

44. **+INDICATE HOW WATER IS SUPPLIED AND HOW SEWAGE DISPOSAL IS PROVIDED TO THE SUBJECT LAND:**

WATER

SEWAGE

- | | |
|---|---|
| <input type="checkbox"/> Publicly owned and operated piped water system | <input type="checkbox"/> Publicly owned and operated piped sanitary sewage system |
| <input type="checkbox"/> Privately owned and operated individual well | <input type="checkbox"/> Privately owned and operated communal septic system |
| <input type="checkbox"/> Privately owned and operated communal well | <input type="checkbox"/> Privately owned and operated individual septic system |
| <input type="checkbox"/> Lake or other water body | <input type="checkbox"/> Privy |
| <input type="checkbox"/> Other means: _____ | <input type="checkbox"/> Other means: _____ |

45. **+IF THE PROPOSED DEVELOPMENT IS SERVICED BY A PRIVATELY OWNED AND OPERATED INDIVIDUAL OR COMMUNAL SEPTIC SYSTEM, WILL THE COMPLETED DEVELOPMENT PRODUCE MORE THAN 4500 LITRES OF EFFLUENT PER DAY?**
 Yes No

+IF YES, THE FOLLOWING PROFESSIONALLY PREPARED REPORTS ARE REQUIRED TO BE SUBMITTED WITH THIS APPLICATIONS:

- Servicing Options Report
- Hydrogeological Assessment with Nitrate Impact Assessment

46. **+HOW IS STORM DRAINAGE PROVIDED?** Sewers Ditches Swales Other Means

47. **+IS THE SUBJECT LAND ALSO THE SUBJECT OF AN APPLICATION FOR APPROVAL OF A PLAN OF SUBDIVISION OR CONSENT?** Yes No Don't know

+IF YES, PLEASE STATE, IF KNOWN, THE FILE NUMBER AND THE STATUS OF THE APPLICATION:

File No.: _____ Status: _____

48. **+HAS THE SUBJECT LAND EVER BEEN THE SUBJECT OF AN APPLICATION UNDER SECTION 34 OF THE PLANNING ACT?** Yes No Don't know

49. **+HAS THE SUBJECT LAND EVER BEEN THE SUBJECT OF A MINISTER'S ZONING ORDER?**
 Yes No

+IF YES, PLEASE STATE IF KNOWN, THE ONTARIO REGULATION NUMBER OF THAT ORDER:

50. APPLICATION SKETCH

On a separate page(s), please provide a sketch, preferably prepared by a qualified professional, showing the following: (In some cases, it may be more appropriate to prepare additional sketches at varying scales to better illustrate the proposal.)

- +Boundaries and the dimensions of the subject land for which the amendment is being sought.
- +The location, size and type of all existing and proposed buildings and structures, indicating the distances from the front yard lot line, rear yard lot line and the side yard lot lines.
- +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.
- +The current uses on land that is adjacent to the subject land.
- +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 docking facilities to be used.
- +The location and nature of any easement affecting the subject land.
- Applicant's Name
- Date of Sketch
- The scale to which the sketch is drafted (e.g. 1 cm = 50 m)
- North Arrow
- The locations and dimensions of off-street parking spaces and off-street loading facilities.
- Planting strips and landscaped areas.
- Buildings to be demolished or relocated.

PART IV OTHER SUPPORTING INFORMATION

51. **PLEASE LIST THE TITLES OF ANY SUPPORTING DOCUMENTS** (e.g., Environmental Impact Study, Hydrogeological Report, Traffic Study, Market Area Study, Aggregate License Report, Stormwater Management Report, etc.):

PART V AUTHORIZATION OF OWNER FOR AGENT TO MAKE THE APPLICATION:

(If affidavit (Part VI) is signed by an Agent on owner's behalf, the Owner's written authorization below must be completed)

I (we) _____ of the _____

of _____ in the County of Renfrew do

hereby authorize _____ to act as my (our) agent in this application.

PART VI *+AFFIDAVIT (This affidavit must be signed in the presence of a Commissioner):

I (we), _____ of the _____
of _____ in the County of Renfrew solemnly
declare that
all of the information required under Ontario Regulation 543/06 and/or Ontario Regulation 545/06, and the
statements contained in this application 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 and by virtue of
the **CANADA EVIDENCE ACT**.

DECLARED before me at the _____ of _____
in the County of Renfrew this _____ day of _____,
2 _____.

Signature of Owner or Authorized Agent Date

Signature of Commissioner Date

NOTE: One of the purposes of the Planning Act is to provide for planning processes that are open, accessible, timely and efficient. Accordingly, all written submissions, documents, correspondence, e-mails or other communications (including your name and address) form part of the public record and will be disclosed/made available by the County/local Municipality to such persons as the County/local Municipality sees fit, including anyone requesting such information. Accordingly, in providing such information, you shall be deemed to have consented to its use and disclosure as part of the planning process.

(To be completed by the Municipality)

“COMPLETE” APPLICATION AND FEE OF \$ _____ RECEIVED BY THE MUNICIPALITY:

Date Signature of Municipal Employee

Roll # _____