

# Township of Elizabethtown -Kitley

**Main Administration Office**  
6544 New Dublin Rd  
RR 2  
Addison, ON K0E 1A0



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## APPLICATION FOR ZONING BY-LAW AMENDMENT

SECTION 34, PLANNING ACT, 1990, R.S.O.  
(as per Regulation 545/06, SCHEDULE 1 - INFORMATION AND MATERIAL  
TO BE PROVIDED WITH A REQUEST UNDER SUBSECTION 34(10.1) OF THE ACT)

**The undersigned** hereby applies to the Council of the TOWNSHIP OF ELIZABETHTOWN-KITLEY for amendment to the zoning by-law, in respect of lands herein described, as outlined in this application (pages 1-10).

**The undersigned** hereby acknowledges that the filing of this application alone does not necessarily constitute fulfilling all the requirements of either the Township, The Planning Act, or the Provincial Policy Statement (PPS), that may arise during the assessment of the application.

**The undersigned** hereby provides a cheque made payable to the Township of Elizabethtown-Kitley to accompany this application in the amount of **\$2,100.00** (or **\$3,600.00** for concurrent Official Plan and Zoning By-law Amendment) The applicant agrees to pay in full any further costs to the Township which may be incurred relating to this application within thirty (30) days of date of invoice.

**The undersigned** hereby will provide any additional fees, by cheque, made payable to any other review authority as the Township so directs.

**The undersigned** acknowledges that the date of the request will be the date the application is received/ stamped in/by the New Dublin Municipal Office (Schedule 1,3,O.Reg. 543/06).

DATE RECEIVED: \_\_\_\_\_ (for office use only)

1. Name of Property Owner(s) \_\_\_\_\_  
Telephone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
E-mail Address (optional) \_\_\_\_\_
2. If known, the date the property was acquired by the current owner \_\_\_\_\_

3. Name of Applicant/Agent \_\_\_\_\_

*Note: If Applicant/Agent is different than Property Owner, the Owner's Authorization is required (see p.10).  
The Applicant/Agent will receive all communications relating to this application.*

Telephone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mailing Address \_\_\_\_\_

E-mail Address (optional) \_\_\_\_\_

4. If known, the names and addresses of any mortgages, charges or other encumbrance holders on property:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Legal description of subject land:

Lot(s) \_\_\_\_\_ Concession(s) \_\_\_\_\_; Geographic Township \_\_\_\_\_

Registered Plan \_\_\_\_\_ Lot(s) \_\_\_\_\_ Reference \_\_\_\_\_ Part(s) \_\_\_\_\_

Street Address (No./Rd. Name) \_\_\_\_\_

Assessment Roll Number \_\_\_\_\_

6. Dimensions of subject land (in metric units): Frontage \_\_\_\_\_ Depth \_\_\_\_\_ Area \_\_\_\_\_

Approximate area covered by proposed amendment (if different from above): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

7. Current designation of subject lands in the Official Plan: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Explanation of how the application conforms to the Official Plan: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Current zoning of subject lands in the Zoning By-law: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Explain in detail the purpose, nature and extent of the proposed amendment:

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11. Reasons why the amendment is requested:

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12. Is the new effect of the amendment to alter the boundary of an **area of settlement** or to implement a new **area of settlement**?  YES  NO

*In Section 1 (1) of the Act, an **area of settlement** is defined as an area of land designate in an official plan for urban uses including urban areas, urban policy areas, towns, villages, hamlets, rural clusters, rural settlement areas, urban systems, rural service centres, or future urban use areas, or as otherwise prescribed by regulation*

If yes, please provide details of the Official Plan or Official Plan Amendment that deal with the matter:

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13. Is the effect of the application to remove land from an **area of employment**?  YES  NO

*In Section 1 (1) of the Act, an **area of employment** is defined as an area of land designated in an official plan for clusters of business and economic uses including, without limitation the uses listed in subsection (5) or as otherwise prescribed by regulation. Under subsection (5), the uses within an area of employment are:*

- a) manufacturing uses;
- b) warehousing uses;
- c) office uses;
- d) retail uses that are associated with uses specified in cluses (a) to (c); and
- e) facilities that are ancillary to uses mentioned in clauses (a) to (d)

If yes, provide details of the Official Plan or Official Plan Amendment that deals with the matter:

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14. Is the property in an area where zoning with conditions apply?

YES

NO

If yes, please provide an explanation of how the application conforms to the Official Plan policies relating to zoning with conditions:

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15. Type of Access: *(check appropriate space)*

Provincial Highway

Municipal Road   
(maintained year round)

County Road

Municipal Road   
(seasonally maintained)

Right-of-way

Water Access

Other (explain) \_\_\_\_\_

16. If access is by water only, specify the parking and docking facilities used/to be used and the approximate distance of these facilities from the subject land and the nearest public road:

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17. Existing use(s) of the subject land:

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18. If known, the length of time that the existing uses of the subject land have continued:

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19. Proposed use(s) of the subject land:

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

	<u>Existing</u>	<u>Proposed</u>
Publicly owned/operated piped water system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned/operated communal well	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned/operated individual well	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	_____	_____

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

	<u>Existing</u>	<u>Proposed</u>
Publicly owned/operated sanitary sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned/operated communal septic system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned/operated individual septic system	<input type="checkbox"/>	<input type="checkbox"/>
Privy	<input type="checkbox"/>	<input type="checkbox"/>
Other means (please specify)	_____	_____

27. If the application involves development on privately owned and operated individual or communal septic systems and involves the daily production of more than 4500 litres of effluent as a result of the development being completed, the following are required:

- Please check**
- Servicing Options Report
- Hydro-geological Report

28. Is storm drainage provided by sewers, ditches, swales, or other means?

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29. If known, please specify whether the property has ever been the subject of an application under the Planning Act for approval of a plan of subdivision or a severance:

- YES  NO

If yes, please specify the file number and status: \_\_\_\_\_

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30. If known, please specify whether the property has ever been the subject of an application for amendment under Section 34 of the Planning Act:

YES

NO

If yes, please specify the file number and describe the application: \_\_\_\_\_

31. If known, please indicate whether the property has ever been the subject of a Minister's Zoning Order:

YES

NO

If yes, please provide the Ontario Regulation number of that order: \_\_\_\_\_

32. Is this application consistent with the Provincial Policy Statement (PPS) as issued under subsection 3 (1) of the Act? Explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

33. Is the property within an area of land designated under any provincial plan or plans?

YES

NO

If yes, please discuss whether the application conforms to or does not conflict with the applicable provincial plan or plans:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

34. Please submit a sketch (in metric units) showing the following:

*Please Check*

*Required Information*

- i. The boundaries and dimensions of the subject land/area to be rezoned.  
ii. The location, size and type of all existing and proposed building/structures on the subject land and on abutting lots indicating the distance of building/structures from the front yard lot line and the side yard lot lines.

- iii. The approximate location of all natural and artificial features on the subject land and on abutting lots 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.

- iv. The location of well and sewage system components (eg. tank and leaching bed) and the distances from sewage system to adjacent existing or proposed buildings, water supplies (including neighbours), driveways, property lines, lakes, rivers, water courses, swimming pools, wells, etc. Also note any topographic features (eg. swamps, steep slopes) near system.

- v. The current uses on adjacent lots.

- vi. The location, width and name of any roads within or abutting the subject land, indicating whether it is: unopened road allowance; public traveled road; private road; right-of-way.

- vii. If access to the subject land is by water only, the location of the parking and docking facilities to be used.

- viii. Location and nature of any easement affecting the subject land.

**The Township reserves the right to request, at any time, that the applicant provide a locational survey drawn by an Ontario Land Surveyor to clarify details of the application.**

**PUBLIC CONSULTATION STRATEGY:**

*(please sign only one (1) of the below options)*

Re: Official Plan Amendment Application and/or Zoning By-law Amendment Application related to lands in Concession \_\_\_\_\_, Pt. Lot 16 \_\_\_\_\_, Geographic Township of \_\_\_\_\_  
Civic Address: \_\_\_\_\_

**OPTION 1:**

We hereby agree to comply with all Planning Act regulation/circulation requirements respecting the above noted amendments as well as any other standard Township public notification practices with respect to public notification and circulation of our related amendment matters.

Signed by:

\_\_\_\_\_  
Name:

Dated:

**OR**

**OPTION 2:**

We hereby propose, in addition to meeting the Planning Act regulation/circulation requirements and other standard Township public notification practices related to our filed amendment, the added/ attached public consultation strategy.

Signed by:

\_\_\_\_\_  
Name:

Dated:



**OWNER'S AUTHORIZATION FOR PERMISSION TO ENTER PROPERTY**

I/We, \_\_\_\_\_, am/are the owner(s) of the land that is subject of this application for site plan approval and I/We authorize Township of Elizabethtown-Kitley staff, committee members, councillors or their assigns to enter the property for the purpose of their assessment of this application (so long as the file remains active). This includes, in the event of any appeal to the Tribunal, the right to attend and enter on the property for the purposes of inspecting up to and including the time at which the Tribunal makes the final decision on the application.

\_\_\_\_\_  
*Signature of Owner(s)*

\_\_\_\_\_  
*Signature of Owner(s)*

\_\_\_\_\_  
*Date*

**OWNER'S AUTHORIZATION FOR AGENT TO MAKE APPLICATION** (Must be Completed if Agent Appointed)

I/We, \_\_\_\_\_, am/are the owner(s) of the land that is subject of this application for site plan approval and I/We authorize \_\_\_\_\_ to make this application on my/our behalf.

\_\_\_\_\_  
*Signature of Owner(s)*

\_\_\_\_\_  
*Signature of Owner(s)*

\_\_\_\_\_  
*Date*

**AFFIDAVIT/SWORN DECLARATION OF APPLICANT**

*(Must be Completed & Witnessed\*)*

I/We, \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_ make oath, say and solemnly declare that the information contained in this application and in the accompanying documents is true, acknowledging 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\**

**Sworn** before me at the \_\_\_\_\_ of \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

\_\_\_\_\_  
Commissioner of Oaths

\* -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.

**Forward COMPLETED APPLICATION with required FEE (payable: Township of Elizabethtown-Kitley) to:** Township of Elizabethtown-Kitley, 6544 New Dublin Road, RR #2, Addison, Ontario, K0E 1M0

***Forward AGENCY FORMS/FEES directly to agencies,*** unless otherwise arranged with Township.