

# Application for Consent

## Municipality of West Grey

402813 Grey Road 4

RR 2 Durham, ON N0G 1R0

Telephone No. 519-369-2200 Fax No. 519-369-5962

To be completed by the Municipality:

Application No. B09.2020

Assessment Roll No. 4205.280.065.10600

Before completing this application and submitting it to the Municipality, please be advised of the following:

Prior to submitting an application for Consent, you are required to discuss the proposal with the Municipal Planner. Please contact the Municipal office to make this arrangement.

The application will only be accepted if: the application has been completed properly; a proper drawing has been submitted; the applicable fees have been submitted; and, the necessary background information in support of the proposed development, where deemed necessary by the Municipality, has been filed. The submission requirements will be outlined during the pre-submission discussions.

Your submission must include a cheque to cover the Consent application fee and a second cheque to cover the applicable Conservation Authority review fee. Please contact the Municipality to determine the exact amount to be paid.

The application must be signed by the applicant before a commissioner of oath. A Municipality staff member has been appointed this position. If the applicant is not the owner of the subject property, the applicant must have authorization from the owner to submit the application (see Question 24 of this application.) If two or more persons collectively own the property, all owners must sign the application form.

### 1. APPLICANT INFORMATION

- a) Registered Owner's Name(s): Candee Homes 2020 Ltd.  
Address: \_\_\_\_\_  
Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_  
E-mail address: \_\_\_\_\_
- b) Applicant's or Agent's Name(s) \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_  
E-mail address: \_\_\_\_\_
- c) Name, Address, Phone of all persons having any mortgage charge on encumbrance on the property: NIL.  
\_\_\_\_\_
- d) Send Correspondence to (check all applicable)? Owner ☒ Agent ☐ Other ☐

2. **SUBJECT PROPERTY**

Municipal Address (if applicable) 401248/401250 Gray Rd 4  
Assessment Roll Number No. 4205-250-005-10603  
Lot 12 Concession 1 Registered Plan No. \_\_\_\_\_  
Lot \_\_\_\_\_ Reference Plan 16R5338

3. **DIMENSIONS OF SUBJECT PROPERTY (in metric)**

Area: 1.3 hectares Frontage: 58.5 metres Depth: 90.2 metres

4. **IS THERE AN EASEMENT(S) OR RESTRICTIVE COVENANT(S) THAT CURRENTLY APPLIES TO THE PROPERTY? IF SO, PLEASE EXPLAIN AND SHOW ON SKETCH.**

NO

5. **WHAT IS THE EXISTING USE OF THE SUBJECT PROPERTY?**

Rental house and commercial building

6. **WHAT IS THE PURPOSE OF THIS CONSENT APPLICATION?**

New lot X  
Lot addition \_\_\_\_\_  
Lease / charge \_\_\_\_\_  
Easement / Right of way \_\_\_\_\_  
Other, specify \_\_\_\_\_

7. **EXPLAIN THE CONSENT PROPOSAL AND INCLUDE THE INTENDED USE OF THE SUBJECT LANDS (BOTH PARCELS IF APPLICABLE):**

8. **IF APPLICABLE, STATE THE NAME OF THE PERSON TO WHOM THE LAND IS TO BE TRANSFERRED, CHARGED OR LEASED:**

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: Home (\_\_\_\_\_) Work (\_\_\_\_\_) Cell (\_\_\_\_\_) \_\_\_\_\_  
E-mail address: \_\_\_\_\_

9. **PROVIDE A DESCRIPTION OF THE PROPOSED LOTS (in metric units)**

	Severed Parcel	Retained Parcel
Frontage (metres)	<u>38.4 m</u>	<u>20.1 m</u>
Depth (metres)	<u>90.2 m</u>	<u>90.2 m</u>
Area (square metres or hectares)		
Current Use	<u>Commercial bld</u>	<u>Res home</u>
Proposed Use	<u>"</u>	<u>"</u>

**10. INDICATE THE TYPE OF ROAD ACCESS:**

Severed Parcel

Retained Parcel

☐
☒
☐
☐
☐
☐
☒
☐
☐
☐

Provincial Highway

County Road

Municipal Road, open year-round

Municipal Road, not maintained year-round

Private Right of Way

**11. INDICATE THE TYPE OF SERVICING:**

Type of Servicing	Severed Parcel		Retained Parcel	
	Existing	Proposed	Existing	Proposed
Water Servicing Municipal, Communal, Private Well	Private Well	Private Well	Private Well	Private Well
Sewer Servicing Communal, Private Septic	Private Septic	Private Septic	Private Septic	Private Septic
Storm Servicing Storm Sewer, Ditches, Swales	Ditch	Ditch	Ditch	Ditch

**12. PROVIDE THE FOLLOWING DETAILS FOR ALL BUILDINGS, EXISTING AND PROPOSED:**

(Use a separate page if necessary)

Buildings	Use of Building	Ground Floor Area (m <sup>2</sup> )	Total Floor Area (m <sup>2</sup> )	No. of Storeys	Height (m)
<b>SEVERED PARCEL</b>					
Existing Building No. 1	House	334		1	
Existing Building No. 2	Shop			2	
Existing Building No. 3					
Existing Building No. 4					
Existing Building No. 5					
Proposed Building No. 1					
Proposed Building No. 2					
Proposed Building No. 3					
<b>Retained Parcel</b>					
Existing Building No. 1					
Existing Building No. 2					
Existing Building No. 3					
Existing Building No. 4					
Proposed Building No. 1					
Proposed Building No. 2					
Proposed Building No. 3					

**13. WHAT IS THE LAND USE DESIGNATION OF THE SUBJECT LANDS ACCORDING TO THE COUNTY OF GREY OFFICIAL PLAN? C3**

**WHAT IS THE LAND USE DESIGNATION OF THE SUBJECT LANDS ACCORDING TO THE**

WEST GREY OFFICIAL PLAN? (IF APPLICABLE) Hazard & Rural

14. WHAT IS THE ZONING OF THE SUBJECT LANDS ACCORDING TO THE MUNICIPALITY OF WEST GREY ZONING BY-LAW? C3

15. IS THE CONSENT APPLICATION CONSISTENT WITH THE PROVINCIAL POLICY STATEMENT? Yes ☒ No ☐

17. HAS THE SUBJECT LANDS EVER BEEN THE SUBJECT OF AN APPLICATION FOR A PREVIOUS PLAN OF SUBDIVISION OR SEVERANCE? Yes ☐ No ☒

IF THE ANSWER IS "YES", PLEASE PROVIDE THE FILE NUMBER AND THE STATUS OF THE APPLICATION: \_\_\_\_\_

18. HAS THE APPLICANT OR OWNER MADE APPLICATION FOR ANY OF THE FOLLOWING, EITHER ON OR WITHIN 120 METRES OF THE SUBJECT LAND?

Official Plan Amendment	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Zoning By-law Amendment	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Minor Variance	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Consent	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Plan of Subdivision	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Site Plan Control	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

IF ANY ANSWER TO ANY OF THE ABOVE IS "YES", PLEASE PROVIDE THE FOLLOWING INFORMATION:

File No. of Application: \_\_\_\_\_

Approval Authority: \_\_\_\_\_

Purpose of Application: \_\_\_\_\_

Status of Application: \_\_\_\_\_

Effect on the Current Application for Consent: \_\_\_\_\_

19. LIST ALL PUBLIC AGENCIES TO WHICH YOU DISCUSSED THIS CONSENT APPLICATION PRIOR TO SUBMITTING THIS APPLICATION:

NONE

20. LIST THE TITLES OF ANY SUPPORTING DOCUMENTS SUBMITTED WITH THIS APPLICATION

(e.g. Planning Report, Environmental Impact Study, Traffic Study, Storm Water Management Report, etc.)

NONE

21. REQUIRED DRAWING

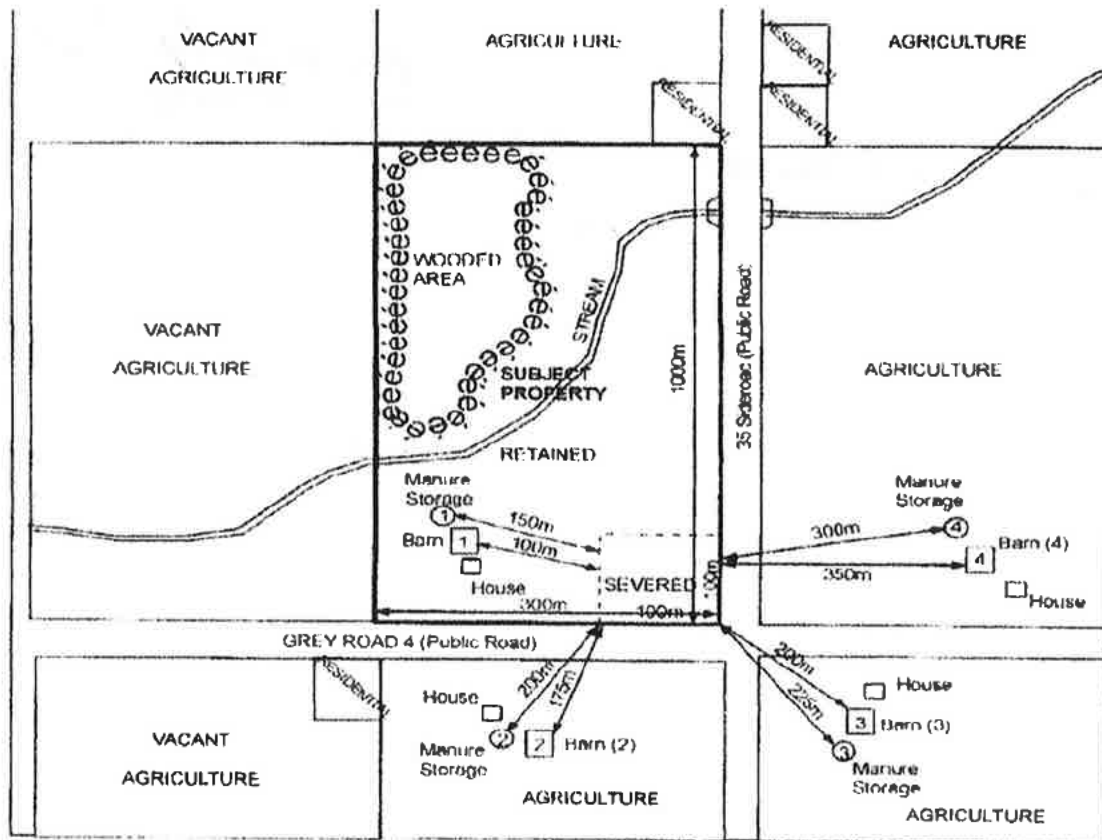
A drawing prepared to scale on an 11" x 14" sheet of paper is required showing:

- the north arrow;
- the lands that are owned by the owner/applicant, including dimensions;
- the lands that only subject to the application, if different from the above, including

dimensions;

- the location of all open and unopen roads that abut the subject property;
- the location of all buildings or structures on the subject property, including setbacks from lot lines;
- the location of the septic system and well, if applicable;
- the location of driveways and parking areas on the subject property;
- the location of other features on the property including forested areas, watercourses;
- the location of easements on the subject property, if applicable;
- the uses of the adjacent lands;
- the location of all barns and manure storage facilities on the subject property and on lands within 500 metres of the subject property;

Sample Drawing



## 22. PUBLIC CONSULTATION

To meet the minimum requirements for Public Consultation under the *Planning Act*, the Planning Department undertakes public consultation on your behalf for your proposed development. Do you propose to undertake any further public consultation (at your own expense) on behalf of your proposal?

☒ No

☐ Yes, I have or plan to speak with my neighbours to clarify any concerns they may have

☐ Other plans: (public open houses, radio or newspaper advertisements, etc; please discuss these plans with the Department prior to initiating them)

## 23. UNDERSTANDING OF OWNER:

The following shall be signed the owner(s) of the subject property:

I (we), Becky Weltz of the Municipality of Town of  
print your name(s) here  
Dan West Grey in the County/Region of Grey

understand and agree to the following:

1. I/we understand that the Application Fee / Deposit Agreement must be signed and submitted along with this application.
2. I/we agree to allow Municipality staff and its representatives to enter upon the premises for the purpose of performing inspections of the subject property.
3. I/we provide my/our consent, in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agents, consultants and solicitors, as well as commenting letters of reports issued by the Municipality.

Becky Weltz  
Signature of Owner

Aug 5/20  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

## 24. AUTHORIZATION FOR AGENT/SOLICITOR TO ACT FOR OWNER:

If the person applying for the Consent, as listed in Question 2, is not the owner of the property, as listed in Question 1, then the following must be completed and signed:

I (we), \_\_\_\_\_ of the \_\_\_\_\_  
print your name(s) here  
\_\_\_\_\_ in the County/Region of \_\_\_\_\_

hereby authorize \_\_\_\_\_ to serve as my/out agent.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

25. AFFIDAVIT

The following must be signed in the presence of a Commissioner of Oath:

I (we), Becky Woltz of the Municipality  
print your name(s) here  
of West Grey in the County Region of Grey

solemnly declare that all 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 Municipality of West Grey  
in the County Region of Grey  
this 14<sup>th</sup> of August, 2020

Genevieve Scharback  
Name of Commissioner

Genevieve Scharback  
Signature

Becky Woltz  
Applicant name in Print

Becky Woltz  
Signature of Applicant

Sworn before me at the Municipality of  
West Grey, in the County of Grey and the  
Province of Ontario,

this 14 day of August, 2020.

Genevieve Scharback  
Genevieve Scharback, Clerk  
Municipality of West Grey  
A Commissioner etc.

\_\_\_\_\_  
Applicant name in Print

\_\_\_\_\_  
Signature of Applicant

To be completed by the Municipality:

Application fee of \$ 900.<sup>00</sup> received by the Municipality.

Conservation Authority review fee of \$ 220.<sup>00</sup> received by the Municipality

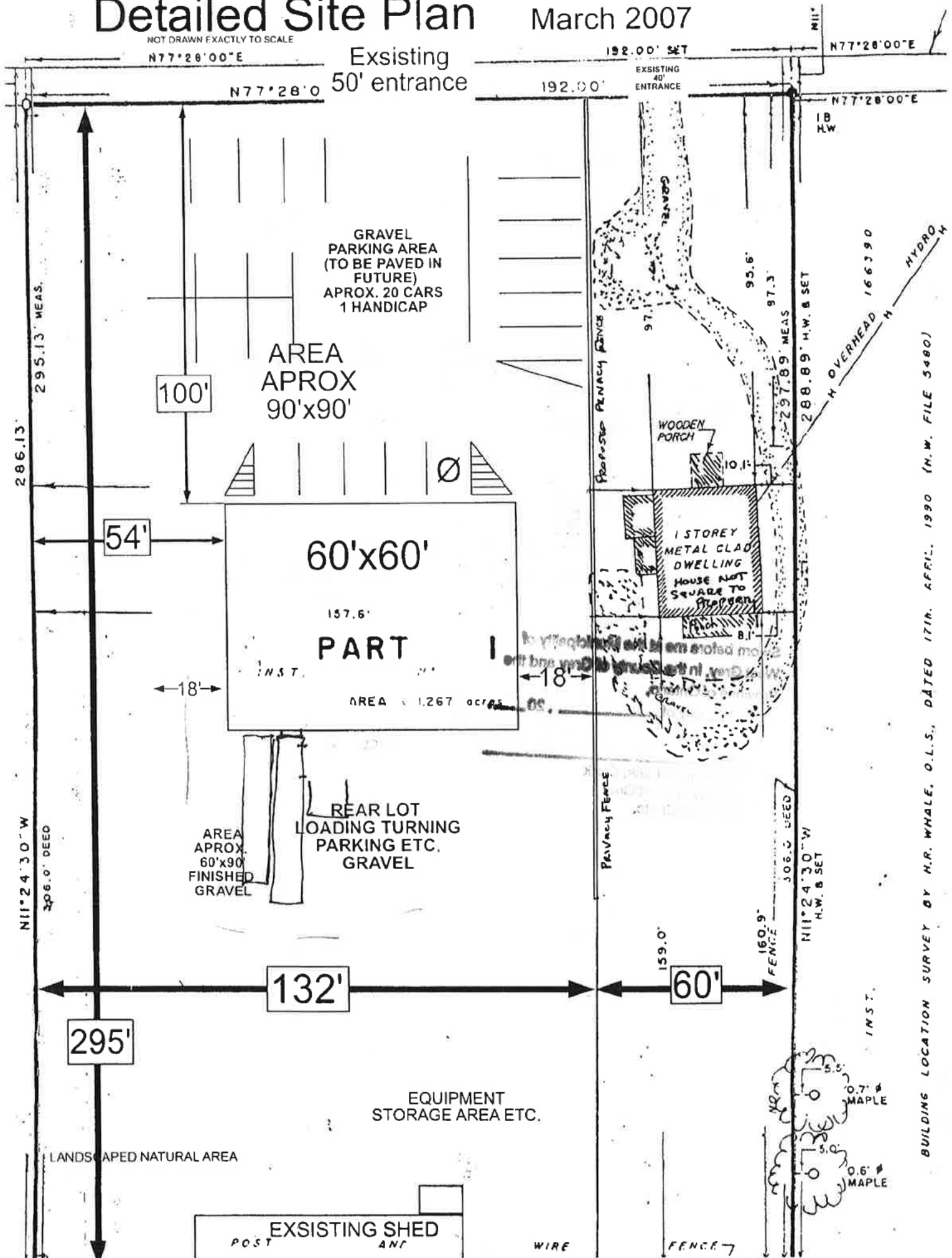
\_\_\_\_\_  
Municipality staff signature



# Detailed Site Plan

March 2007

NOT DRAWN EXACTLY TO SCALE



BUILDING LOCATION SURVEY BY H.R. WHALE, O.L.S., DATED 17TH APRIL, 1990 (N.W. FILE 5480)