

# 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. B11.2021

Assessment Roll No. 420528000211900

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): J.T. EXCAVATING LTD.  
Address: 313611 HIGHWAY 6 NORTH, P.O. BOX 665, DURHAM, ON N0G 1R0  
Phone: Home ( ) Work ( ) Cell ( )  
E-mail address: \_\_\_\_\_
- b) Applicant's or Agent's Name(s): KRISTINE LOFT, LOFT PLANNING INC.  
Address: 25 MAPLE STREET, COLLINGWOOD, ONTARIO L9Y 2P7  
Phone: Home ( 705 ) 446 1168 Work ( ) Cell ( )  
E-mail address: KRISTINE@LOFTPLANNING.COM
- c) Name, Address, Phone of all persons having any mortgage change on encumbrance on the property: Nil
- d) Send Correspondence to (check all applicable)? Owner ☐ Agent ☒ Other ☐

**2. SUBJECT PROPERTY**

Municipal Address (if applicable) 382367 CONCESSION 4 NDR  
Assessment Roll Number No. 420528000211900  
Lot 27-29 Concession 5 Registered Plan No. \_\_\_\_\_  
Lot \_\_\_\_\_ Reference Plan \_\_\_\_\_

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

Area: 91.39 hectares Frontage: 530 metres Depth: 1000 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.** \_\_\_\_\_

Nil

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

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

New lot ✓  
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):** \_\_\_\_\_

To sever a new agricultural parcel with a lot area of 40 ha, and to retain a parcel having a lot area of 50 ha.

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

Name(s): To be confirmed.  
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)	400 m	130 m
Depth (metres)	1000 m	1000 m
Area (square metres or hectares)	40 hectares	50 hectares
Current Use	Agricultural	Agricultural
Proposed Use	Agricultural	Agricultural

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

Severed Parcel	Retained Parcel	
<input type="checkbox"/>	<input type="checkbox"/>	Provincial Highway
<input type="checkbox"/>	<input type="checkbox"/>	County Road
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Municipal Road, open year-round
<input type="checkbox"/>	<input type="checkbox"/>	Municipal Road, not maintained year-round
<input type="checkbox"/>	<input type="checkbox"/>	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	Same	Nil	Private Well
Sewer Servicing Communal, Private Septic	Private Septic	Same	Nil	Private Septic
Storm Servicing Storm Sewer, Ditches, Swales	Ditches	same	Nil	Ditches

**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	83 sqm	140 sqm	2	TBC
Existing Building No. 2	Chicken Coop	74 sqm	74 sqm	1	TBC
Existing Building No. 3	Pole Shed	464 sqm	464 sqm	1	TBC
Existing Building No. 4	Pole Shed	297 sqm	297 sqm	1	TBC
Existing Building No. 5	Barn in back field - to be demolished.				
Proposed Building No. 1	No proposed buildings at this time.				
Proposed Building No. 2					
Proposed Building No. 3					
<b>Retained Parcel</b>					
Existing Building No. 1	Nil				
Existing Building No. 2					
Existing Building No. 3					
Existing Building No. 4					
Proposed Building No. 1	No proposed buildings at this time.				
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?** Agricultural, Rural, Hazard

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

WEST GREY OFFICIAL PLAN? (IF APPLICABLE) \_\_\_\_\_

14. WHAT IS THE ZONING OF THE SUBJECT LANDS ACCORDING TO THE MUNICIPALITY OF WEST GREY ZONING BY-LAW? A1, A2 and EP

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:

Nil, Contact with Municipal Planner

20. LIST THE TITLES OF ANY SUPPORTING DOCUMENTS SUBMITTED WITH THIS APPLICATION  
(e.g. P anning Report, Environmental Impact Study, Traffic Study, Storm Water Management Report, etc.)

Planning Justification Report.

- ## 21. REQUIRED DRAWING

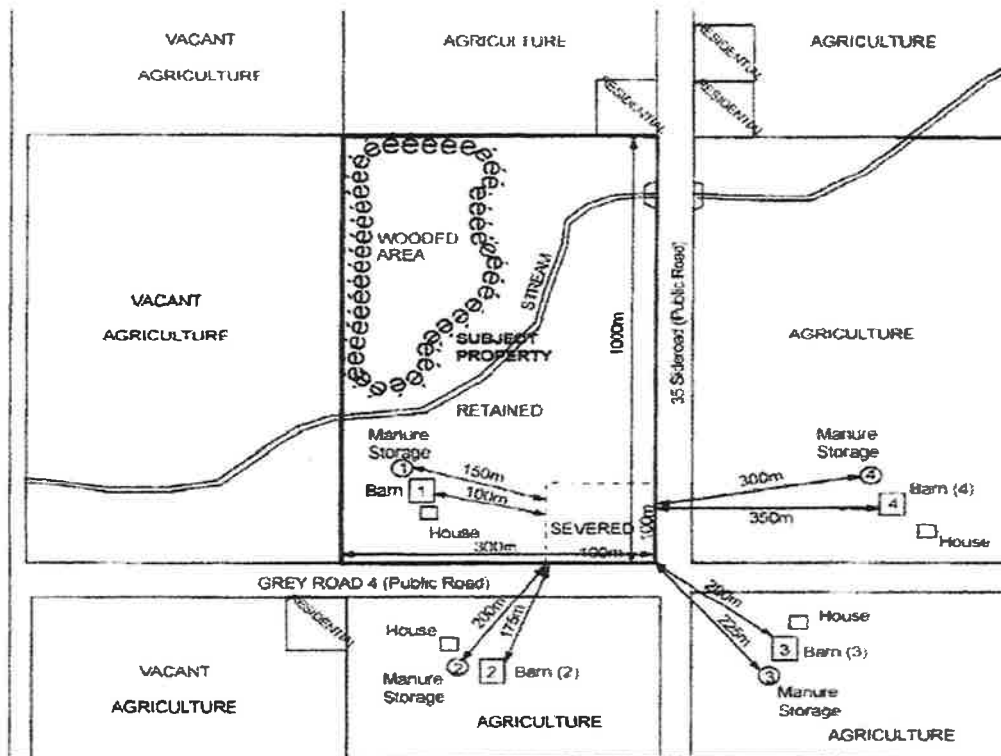
A drawing prepared to scale on an 11" x 14" sheet of paper is required showing:

- 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)

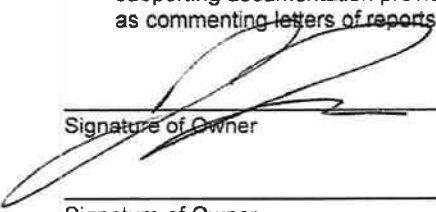
**23. UNDERSTANDING OF OWNER:**

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

I (we), Jason Tremble of the town of Durham  
print your name(s) here  
West Grey in the County/Region of

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.

  
Signature of Owner

March 19 2021  
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), Jason Tremble of the town of Durham  
print your name(s) here  
West Grey in the County/Region of

hereby authorize Loft Planning Inc. to serve as my/out agent.

  
Signature of Owner

March 19 2021  
Date

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

\_\_\_\_\_  
Date

**25. AFFIDAVIT**

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

I (we), Kristine Loft of the Township of Clearview  
print your name(s) here  
\_\_\_\_\_ in the County/Region of Simcoe

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 Town of Collingwood  
in the County/Region of Simcoe  
this 31<sup>st</sup> of March, 2021

Christopher Sargent  
Name of Commissioner  
  
Signature

**Christopher Michael Sargent**  
a Commissioner, etc.,  
Province of Ontario,  
for the Corporation of the Town of Collingwood.  
Expires June 26, 2023

Kristine Loft  
Applicant name in Print  
  
Signature of Applicant

Applicant name in Print

Signature of Applicant

To be completed by the Municipality:

Application fee of \$ \_\_\_\_\_ received by the Municipality.

Conservation Authority review fee of \$ \_\_\_\_\_ received by the Municipality

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