

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. B86/2020

Assessment Roll No. _____

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): SHAMADON RESORT LIMITED c/o MR. STEPHEN SHAM
Address: [REDACTED] CON 2 WGR, RR#3
Phone: Home () Work () Cell [REDACTED]
E-mail address: [REDACTED]
- b) Applicant's or Agent's Name(s) GREG FORD
Address: [REDACTED] KING ST EAST, MOUNT FOREST, ON N0G 2L0
Phone: Home () Work [REDACTED] Cell ()
E-mail address: [REDACTED]
- c) Name, Address, Phone of all persons having any mortgage charge on encumbrance on the property: _____

- d) Send Correspondence to (check all applicable)? Owner Agent Other

2. SUBJECT PROPERTY

Municipal Address (if applicable) 231764 CON 2 WGR, RR #3

Assessment Roll Number No. _____

Lot 47-48 Concession 3 Registered Plan No. /

Lot _____ Reference Plan /

3. DIMENSIONS OF SUBJECT PROPERTY (in metric)

(PORTION TO BE SEVERED IN SEPARATE APPL)

Area: 31.8 hectares Frontage: 259.4 metres Depth: 1398.8 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. /

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

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 CREATE A RIGHT-OF-WAY TO BOTH A CAMPGROUND AND RESIDENCE (BOTH EXISTING)

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

Name(s): MR. STEPHEN SHAM
 Address: CON 2 WGR
 Phone: Home () Work () Cell [REDACTED]
 E-mail address: [REDACTED]

9. PROVIDE A DESCRIPTION OF THE PROPOSED ~~LOTS~~ ^{R-O-W} (in metric units)

	Severed Parcel	Retained Parcel
Frontage (metres)	<u>10.0 m</u>	
Depth (metres)	<u>200.0 m +/-</u>	
Area (square metres or hectares)	<u>0.2 ha</u>	
Current Use	<u>LANEWAY ACCESS</u>	
Proposed Use	<u>LANEWAY ACCESS</u>	

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 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				
Sewer Servicing Communal, Private Septic				
Storm Servicing Storm Sewer, Ditches, Swales				

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 ²)	Total Floor Area (m ²)	No. of Storeys	Height (m)
SEVERED PARCEL					
Existing Building No. 1					
Existing Building No. 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					
Retained Parcel					
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? RURAL / HAZARD LANDS
WHAT IS THE LAND USE DESIGNATION OF THE SUBJECT LANDS ACCORDING TO THE

WEST GREY OFFICIAL PLAN? (IF APPLICABLE) N/A

14. WHAT IS THE ZONING OF THE SUBJECT LANDS ACCORDING TO THE MUNICIPALITY OF WEST GREY ZONING BY-LAW? BY-LAW 76-2009 => OS-114/NE-114

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

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

File No. of Application: BY-LAW # 76-2009
Approval Authority: MUN. OF WEST GREY
Purpose of Application: TO AMEND BY-LAW # 37-2006
Status of Application: APPROVED OCT 5, 2009
Effect on the Current Application for Consent: _____

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

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.)
Ø

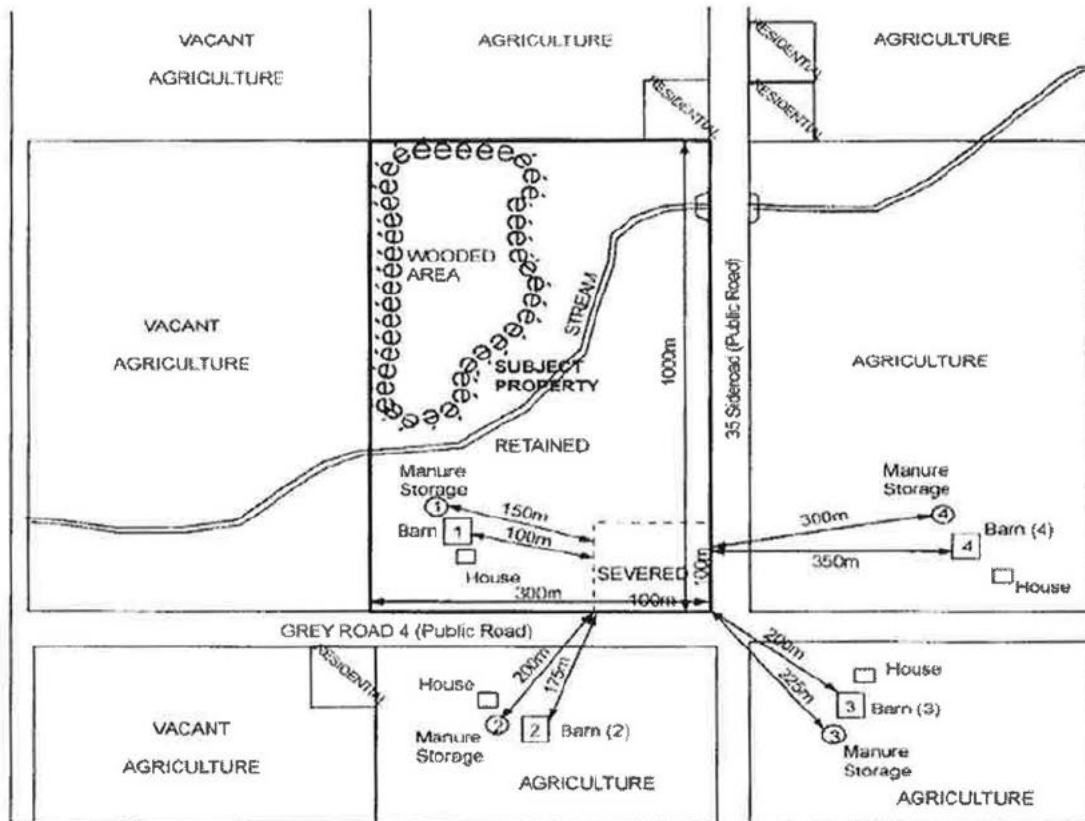
21. REQUIRED DRAWING
A drawing prepared to scale on an 11" x 14" sheet of paper is required showing:

- 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), STEPHEN SHAM of the MUNICIPALITY OF
print your name(s) here
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.

Signature of Owner Stephen Sham

Date July 31, 2020

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), STEPHEN SHAM of the MUNICIPALITY OF
print your name(s) here
WEST GREY in the County/Region of GREY

hereby authorize GREG FORD to serve as my/out agent.

Signature of Owner Stephen Sham

Date July 31, 2020

Signature of Owner _____

Date _____

25. AFFIDAVIT

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

I (we), GREG FORD of the TOWNSHIP OF
print your name(s) here
WELLINGTON NORTH in the County/Region of WELLINGTON

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 _____ of _____
in the County/Region of _____
this _____ of _____, 20__.

Name of Commissioner

Signature

GREG FORD

Applicant name in Print
AGENT

Signature of Applicant AGENT

Applicant name in Print

Signature of Applicant

To be completed by the Municipality:

Application fee of \$ 900⁰⁰ received by the Municipality.

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

Municipality staff signature