



APPLICATION FOR A ZONING BY-LAW AMENDMENT

Under Section 34 of the *Planning Act*, R.S.O. 1990

NOTE: This application consists of Part A and Part B. the undersigned applies to the Township of South Glengarry to amend its zoning By-law. To avoid delays, the information supplied on both parts must be complete and accurate. Please print.

A sketch map and a legal description are required. Incomplete applications will be returned.
All applications must be signed.

PART A Amendment to Zoning By-law _____

1. Names:

Registered Owner _____

Address _____

_____ Postal Code _____

Telephone: Home _____ Business _____

Agent _____

Address _____

_____ Postal Code _____

Telephone: Home _____ Business _____
(if applicable)

2. All correspondence should be sent to (please mark one only)

Owner () Agent ()

3. Who can be contacted during the day for additional information Owner () Agent ()

4. Please provide the name and address of any mortgages, holders of charges or other encumbrances of the subject lands:

5. Location of Property:

Municipality _____ Lot(s) _____ Conc(s) _____

Registered Plan Number _____ Lot(s) _____

Reference Plan Number _____ Part(s) _____ Parcel # _____

If known, please include the date the subject land was acquired by the current owner:

6. Are there any easements or restrictive covenants affecting the property? Yes () No ()

If yes, please describe the easement or covenant: _____

Does the Amendment Affect: Entire Property () Portion of Property ()

7. Description of Land:

Frontage _____ Depth _____ Area _____

8. Type of Application:

Zoning By-Law Amendment () Holding Provisions ()

Interim Control By-law () Temporary Use By-law ()

9. a. Present zoning on the property: _____

b. Why is the Zoning By-law Amendment needed? (Specify sections of the Zoning By-law being contravened). Attach pages if additional space is required.

c. Has the property, or any portion, been the subject of a previous Zoning By-law Amendment application? Yes () No ()

If yes, quote the file number and the application status, and date of application.

File Number: _____ Date: _____

Application Status: _____

d. Has the subject land ever been the subject of a Minister's Zoning Order?

Yes () No ()

e. What is the Official Plan designation of the property? _____

f. Does the requested amendment conform to the Official Plan? Yes () No ()
If yes, explain how this application conforms to the Official Plan policies. Attach pages if additional space is required. (Please list specific sections)

g. Does the requested amendment conform to the Provincial Planning Statement 2024?
Yes () No ()
If yes, explain how this application conforms to the Provincial Planning Statement 2024. Attach pages if additional space is required. (Please list specific sections)

h. Will this application result in the removal of land from an area of employment?
Yes () No ()
If yes, list the details of the Official Plan or Official Plan Amendment that deals with this matter. Attach pages if additional space is required.

10. a. Present use of property:

Residential () Farmland () Industrial () Commercial () Institutional ()
Seasonal Residential () Storage () Other (specify) _____
Past uses _____

(include uses that may result in health, safety, or environmental risks)

If known, please include the length of time that the existing uses of the subject land have continued.

b. List any existing buildings or structures on land:

Buildings	Setbacks Front/Rear/Side/Side	Building Dimensions	Building Height	*Date Built
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1. _____
2. _____
3. _____

*If known, please also include the date any existing buildings or structures were built.

11. a. Proposed use of property:

Residential () Farmland () Industrial () Commercial () Institutional ()
Seasonal Residential () Storage () Other (specify) _____

b. List proposed buildings or structures:

Buildings	Setbacks Front/Rear/Side/Side	Building Dimensions	Building Height
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1. _____
2. _____
3. _____

12. Number of Parking Spaces: #Existing _____ #Proposed _____

See part 4. Of the Zoning By-Law for required parking space sizes.

13. Land use of neighbouring properties:

	Land Use	Buildings/Structures
North	_____	_____
South	_____	_____
East	_____	_____
West	_____	_____

14. Types of Servicing: The property will be serviced by (check appropriate spaces)

a. Water Supply

Publicly owned and maintained piped water system ()
Private Well () Other (specify source i.e. lake) _____

b. Sewage Disposal

Publicly owned and maintained sanitary sewage system ()

Septic Tank and Tiled Bed () Other (specify) _____

Will this application permit development on privately owned and operated individual or communal septic systems, and resulting in more than 4500 litres of effluent being produced per day? Yes () No ()

If yes, a servicing options report and a hydrogeological report shall be submitted with this application.

c. Will storm drainage be provided by: Sewers () Ditches () Swales () Other ()

d. Road Access

Public Road maintained by: Local Road Department () Counties ()

Private Road () Water access only (identify nearest public access) _____

Other _____

PART B

Please attach a sketch of the subject property demonstrating all dimensions, structures, and significant features. Please use metric units.

- a) The boundaries and dimensions of the subject land.
- b) The location, size, and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the front yard lot line, rear yard lot line, and the side yard lot lines.
- c) 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 application, may affect the application. Examples of features include buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded area, wells and septic tanks.
- d) The current uses on land that is adjacent to the subject land neighbouring land uses.
- e) The location, width, and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road or a right-of-way.
- f) If access to the subject land is by water only, the location of the parking and docking facilities to be used.
- g) The location and nature of any easement affecting the subject land.

THIS SECTION MUST BE COMPLETED IN THE PRESENCE OF THE "COMMISSIONER". THE MUNICIPALITY HAS COMMISSIONERS AVAILABLE.

I, _____ of the _____ of _____, in the County of _____, hereby solemnly declare that the information contained in this application are on the attached plan and any associated information submitted with this application are, to the best of my belief and knowledge, a true and complete representation of the purpose and intent of this application.

Date: _____

Signature of Owner

Signature of Agent or Applicant

DECLARED BEFORE ME AT THE

_____ OF _____
IN THE _____ OF _____, THIS
_____ DAY OF _____, 20_____.

A COMMISSIONER, ETC.

**FREEDOM OF INFORMATION/ACCESS TO PROPERTY
CONSENT OF OWNER**

I, _____, being the registered owner of the lands subject of this application for the zoning amendment, and for the purposes of the Freedom of Information and Protection of Privacy Act, hereby authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected under the authority of the Planning Act for the purposes of processing this application. I also authorize and consent to representatives of the Municipality of South Glengarry, and the persons and public bodies conferred with under section 34 (15) of the Planning Act, entering upon the lands subject of this application for the purpose of conducting any site inspections as may be necessary to assist in the evaluation of this application.

Date

Owner's Signature

APPLICANT/AGENT AUTHORIZATION FORM

The Corporation of the Municipality of South Glengarry
In the Matter of Application for Zoning By-Law Amendment
Authorization under Ontario Regulation 406/83
{Subsection 2(3)}

I, _____ being the () registered owners(s), () executor/executrix, () signing corporate officer(s) of the lands for which this application is to be made, hereby authorize and direct _____ to act as my agent and on my behalf to apply to the Corporation of the Municipality of South Glengarry for a zoning by-law amendment on the lands herein described.

Former Municipality _____

Lot(s) _____ Concession _____

Lot(s) _____ Registered Plan _____

Part(s) _____ Reference Plan _____

Street Address _____

Date

Date

Signature of Owner

Signature of Owner

Received by: _____ **Date:** _____

Application for Zoning Amendment File Number: _____