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## Application for Official Plan or **Zoning By-law Amendment**

Under the Planning Act, R.S.O. 1990 c.P.13, as amended

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## PLEASE TYPE CLEARLY - INCOMPLETE APPLICATIONS WILL BE RETURNED WITH A FEE

| Office Use:  |                            |                      |                  |   |  |  |
|--|----------------------------|----------------------|------------------|---|--|--|
| Date Received:   | Date Circulated: Fil       |                      | File N           | Number:                                 |  |  |
|  |                            |                      | A 2000           | : J 511 <sub>0</sub> / <sub>0</sub> \.  |  |  |
|  |                            |                      | ASSOC            | ciated File(s):                         |  |  |
| Type of Application  | (Please Cl                 |                      | DI 4             |   |  |  |
| ☐ Zoning By-law Amer   |                            |                      |                  | mendment                                |  |  |
| ☐ Temporary Use By-law ☐ Removal of Holding Symbol Amendment*  *(Please note that a Regional Clearance Letter will be required at application) |                            |                      |                  |   |  |  |
| Applicant Applicant is: ☐ Owner or ☐ Authorized Agent of Owner   |                            |                      |                  |   |  |  |
| Last Name  | First Name                 | <u> </u>             |                  |   |  |  |
| Street Address   |                            |                      | Unit Number      |   |  |  |
| Street Address   |                            |                      |                  | - Chief Hamber                          |  |  |
| Municipality   | Province                   | Province Postal Code |                  | Email                                   |  |  |
| Telephone Number   | Fax                        |                      |                  | Cell Number                             |  |  |
| releptione Number Fax  |                            |                      |                  | Contramber                              |  |  |
| Registered Owner /r  | nclude Name(s) and Title(s | s) of those au       | thorizea         | to bind if a Corporation                |  |  |
| Last Name  | First Name                 | Company              | Name             | ame                                     |  |  |
| 6  |                            |                      |                  |   |  |  |
| Street Address   |                            |                      |                  | Unit Number                             |  |  |
| Municipality   | Province                   | Province Postal Code |                  | Email                                   |  |  |
|  |                            |                      |                  |   |  |  |
| Telephone Number   | Fax                        | Fax                  |                  | Cell Number                             |  |  |
| Date Owner Acquired Subject Property   |                            |                      |                  |   |  |  |
| , , , , , , , , , , , , , , , , , , ,  |                            |                      |                  |   |  |  |
| Primary contact for ALL future   | correspondence:            | ☐ Owner              | □ A <sub>l</sub> | oplicant                                |  |  |
| Property Information A   | polications submitted with | out complete         | nd proper        | rty information will not be circulated. |  |  |
| Lot  | Concession                 |                      | а ргорог         | Geographic Township                     |  |  |
|  |                            |                      |                  |   |  |  |
| Registered Plan  | Lot/Block                  | Lot/Block            |                  | Reference Plan                          |  |  |
| Municipal Address  |                            | Assessment           | Dall             |   |  |  |
| Wuricipal Address  |                            | Assessment           | NOII             |   |  |  |
| Lot Area   | Frontage                   |                      |                  | Depth                                   |  |  |
|  |                            |                      |                  |   |  |  |
| Describe any easements, rights-of-way or restrictions applicable to the subject land(s)  |                            |                      |                  |   |  |  |
|  |                            |                      |                  |   |  |  |

| Existing Use, Official Plan And Zoning  |                        |  |  |                        |                 |  |
|---|------------------------|--|--|------------------------|-----------------|--|
| Existing use(s) of subject land, including buildings:   |                        |  |  |                        |                 |  |
| Region of Halton Official Plan Designation:   |                        | Does proposal conform to Halton OP Policies?  ☐ Yes ☐ No   |  |                        |                 |  |
| Town of Milton Official Plan Designation:   |                        |  | Does proposal conform to Milton OP Policies?  ☐ Yes ☐ No |                        |                 |  |
| Present Town of Milton Zoning:  |                        |  |  |                        |                 |  |
| Name of Agency having jurisdiction over road to which subject property abuts/fronts:   Ministry of Transportation  Region of Halton  Town of Milton |                        |  |  |                        |                 |  |
| Is a road widening required for the subject property?  ☐ Yes ☐ No   |                        | Has the proposed road widening been discussed with Town Staff?  ☐ Yes ☐ No                           |  |                        |                 |  |
| Is the subject property within an area designated "Environmentally Sensitive" in the Official Plans of the Town of Milton and the Region of Halton? |                        | Is the subject property within an area designated "Hazard Land" in the Town of Milton Official Plan? |  |                        |                 |  |
| ☐ Yes ☐ No  |                        |  | ☐ Yes  | □ No                   |                 |  |
| Is the area regulated by the flood and fill regulat   | ions of the applicable | Has thi  |  | ed by Conservation A   | uthority staff? |  |
| Conservation Authority?   |                        |  |  | -                      | ·               |  |
| ☐ Yes ☐ No  |                        |  | ☐ Yes  | ☐ No                   |                 |  |
| Are there any buildings or structures on the subj   | ect property?          | If Yes,  | please include o   | details on plan provid | led.            |  |
| □ Yes □ No  |                        |  |  |                        |                 |  |
| What is the date of construction of the existing buildings/structures on the subject property?  |                        | How long has/have the existing use(s) of the subject property continued?                             |  |                        |                 |  |
| Is the building suitable for the proposed use in terms of meeting the requirements of the <i>Ontario Building Code Act</i> ?  □ Yes □ No            |                        |  |  |                        |                 |  |
| Water (Municipal/Private)  □ Existing  □ Proposed  Wastewater (Municipal □ Existing □   |                        | /Private)   Stormwater (Urban/Rural)   Proposed   □ Existing   □ Proposed                            |  |                        |                 |  |
| -   | ing Justification Repo | rt prepa   | red by a quali   | fied consultant mag    | y be required.  |  |
| Describe in detail the proposed use(s) of the subject property:   |                        |  |  |                        |                 |  |
| Describe the nature, extent and reason for the rezoning:  |                        |  |  |                        |                 |  |
| Are there any buildings/structures proposed on the subject property?  If Yes, please provide details.   |                        |  |  |                        |                 |  |
| Has "Parkland Dedication" requirements been discussed with Town Staff?  ☐ Yes ☐ No  |                        |  |  |                        |                 |  |
| Financial Requirements  |                        |  |  |                        |                 |  |
| Have you discussed other financial requirements (i.e. local Development Charges) with Town Staff?  Yes  No  |                        |  |  |                        |                 |  |
| Other Development Applications  |                        |  |  |                        |                 |  |
| Is the subject property the subject of an applicat<br>Planning Act for approval of a plan of subdivision  |                        | If Yes,  | please provide   | file number and decis  | sion, if known. |  |
| local/official plan amendment and/or minor varia  |                        |  |  |                        |                 |  |
|   | Unsure                 |  |  |                        |                 |  |

| 1   |                  | of the                   |                            |         |  |  |
|---|------------------|--------------------------|----------------------------|---------|--|--|
| (Name)  |                  | , of the<br>(City/Town)  |                            |         |  |  |
| of(Municipality)  | , in the         | of _<br>(County          | v/Region)                  |         |  |  |
| SOLEMNLY DECLARE THAT attached hereto are true and I knowing that it is the same force Act. | make this solemn | declaration consciention | ously believing it to be t | rue and |  |  |
| Declared before me at the   | of<br>Town/City  | in the                   | of<br>Region/County        |         |  |  |
| this day of   | 20               |                          |                            |         |  |  |
| A Commissioner, etc.  |                  | Signature of Ow          | ner or Authorized Agent    |         |  |  |
|   |                  | Print Name               |                            |         |  |  |

## **OWNER'S AUTHORIZATION**

| If Applicant/Agent is not the Registered Own   | ner, the Owner's written authorization is required.  |  |  |
|--|--|--|--|
| With respect to lands owned by:  |  |  |  |
| (PRINT Owner(  | (s) Name / Corporate signing authority)  |  |  |
| known as:  |  |  |  |
| (Legal Descri  | iption /Municipal Address of Lands)  |  |  |
|  | er of the lands described in this application, have examined certify that the information submitted with the application is facts, and I hereby authorize:   |  |  |
| of   |  |  |  |
| (Name of Agent)  | (Name of Company)  |  |  |
| thereof, to enter upon the subject lands an application and subsequently to conduct an that may be required as condition of approximately approximately an entering the subject lands an application and subsequently to conduct an entering the subject lands an application and subject lands and application and subject lands are subject lands. | e further consent to Town of Milton staff or a representative of premises for the purpose of evaluating the merits of this y inspections and work on the subject lands and structures oval and that the Town of Milton be authorized to release oplicant/agent named within this agreement, for the specific cation.   |  |  |
| the <i>Planning Act</i> , R.S.O. 1990, Chapter P.13 of <i>Information and Protection of Privacy A</i> application and forms part of the public reco<br>The name and business address of the appersonal information collected will only be  | n requested on this form is collected under the authority of 3, as amended and the provisions of the <i>Municipal Freedom Act</i> . The information is required in order to process this rd which may be published on the Town of Milton's website plicant and/or authorized agent is public information. Any one used for the internal processing of this application made to the Town of Milton's Development Services |  |  |
| (Date)   | * (ORIGINAL Signature of Registered Land Owner)  |  |  |
|  | PRINT NAME   |  |  |