

# APPLICATION FOR AMENDMENT TO THE OFFICIAL PLAN OF THE TOWNSHIP OF MALAHIDE

**Note:** This application must be filed in duplicate with the Clerk of the Township of Malahide.

**To:** The Clerk of the Township of Malahide

**I HEREBY SUBMIT THIS** application to amend the **Official Plan** of the Township of Malahide with respect to the lands herein described. This Application is accompanied by a deposit payment in the amount of **\$2,500.00**.

**I, the Applicant,** acknowledges that if an OMB Hearing is required, an additional deposit of **\$7,000.00** will be submitted to the Township of Malahide prior to the Township sending the notice to the OMB. The actual expenses related to the OMB hearing shall be calculated and 50% of the costs will be deducted from the said deposit. Any balance remaining will be refunded.

**I, the Applicant,** shall assume responsibility for any additional costs exceeding the deposited amounts related to the said application and the OMB hearing and understand and agree that for payment of said additional costs shall be a condition of this signed application. I also agree to accept all costs as rendered.

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**Property Owner**

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**Property Owner**

**FOR OFFICE USE ONLY**

<b>DATE RECEIVED:</b>	<b>AMOUNT RECEIVED:</b>
<b>FILE NO:</b>	<b>DATE ADOPTED BY COUNCIL:</b>

## ASSOCIATED PLANNING COSTS

The Application fee paid is a **deposit** towards the actual costs which shall be incurred by the Township during the review and approval process.

The Applicant will be billed for the difference between the actual costs incurred and the deposit. If the deposit exceeds the actual cost, a refund will be made.

There is **no guarantee** that any application considered will be approved. An Applicant can spend his (her) money for the planning review process and still not be able to do what they desire.

Basic steps are established in the Planning Act and associated regulations. They include: a notice, review, consultation, public meeting, and Council decision. Major amendments will be subject to a more demanding and complex planning review process which will be reflected in the final costs paid.

Fees shall be based on municipal staff time, consultant fees (planners) and associated costs and disbursements needed to carry out the review of the planning application. **Basically, all costs from the conception of the application up to the decision of Council including posting notification are at the expense of the Applicant. If you wish to discontinue, you must notify the Township in writing and you will be responsible for all costs to that time and any costs to terminate the process you have set in motion.**

Example – 2005 Costs

Municipal Staff billed out at following rates (subject to change)

CAO/Clerk:                 \$ 58.99 per hour

Assistant Clerk:         \$ 36.38 per hour

Other:                     Disbursements including advertising, fax, photocopies, postage, prints, mileage, delivery service, telephone calls, etc.

Consultant fees billed out at following rates (Subject to change)

Senior Planner:         \$147.00 per hour

Secretary:               \$63.00 per hour

Other:                     Disbursements including advertising, fax, photocopies, postage, telephone calls, delivery service, prints, mileage, special reports, etc.

**FURTHER to my signed Affidavit, I acknowledge that there are associated costs for this application and agree to accept the Planners bills as rendered. All accounts are due when rendered. All overdue amounts are subject to penalty of 18% per annum.**

1. **Registered Owner's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone No. (Home): \_\_\_\_\_ Business: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Lot and Concession (if applicable): \_\_\_\_\_

2. **Applicant / Authorized Agent:** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax: \_\_\_\_\_

Please specify to whom all communications should be sent:

Registered Owner ( ) Applicant / Authorized Agent ( )

3. **Legal Description of the land for which the amendment is requested:**

Concession: \_\_\_\_\_ Lot: \_\_\_\_\_

Reference Plan No: \_\_\_\_\_ Part Lot: \_\_\_\_\_

Street and Municipal Address No.: \_\_\_\_\_

4. **Size of property which is subject to this Application:**

Area:   m   Frontage:   m   Depth:   m  

5. **Does the proposed amendment add, change, replace, or delete a policy/schedule of the Official Plan?**

Add ( ) Change ( ) Replace ( ) Delete ( )

If so, policy/schedule to be added, changed, replaced, or deleted: \_\_\_\_\_

**Attach separately the requested additions, changes, or replacements.**

6. **Does the proposed amendment alter a growth boundary of any settlement area?** \_\_\_\_\_

If so, attach separately justification for the request based on the current Official Plan policies.

**7. Does the proposed amendment remove land from an area of employment designation?**

If so, attach separately justification for the request based on the current Official Plan policies.

**8. Existing Official Plan Designations:** \_\_\_\_\_

**Land Uses Permitted in existing Designation:**

\_\_\_\_\_

**9. Present Use of subject lands (be specific):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10. Proposed Official Plan Designation:** \_\_\_\_\_

**11. What is the purpose of the proposed Official Plan amendment?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**12. Description of proposed development for which this amendment is requested (i.e. permitted uses, buildings or structures to be erected. (Be Specific)**

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**13. Services existing or proposed for the subject lands: Please indicate with a ✓**

<b>Water Supply</b>	<b>Existing</b>	<b>Proposed</b>
Municipal Piped Water Supply	( )	( )
Private Drilled Well	( )	( )
Private Dug Well	( )	( )
Communal Well	( )	( )
Lake or other Surface Water Body	( )	( )
Other	( )	( )

<b>Sewage Disposal</b>	<b>Existing</b>	<b>Proposed</b>
Municipal Sanitary Sewers	( )	( )
Individual Septic System	( )	( )
Communal System	( )	( )
Privy	( )	( )
Other	( )	( )

**Note: If the proposed development is on a private or communal system and generate more than 4500 litres of effluent per day, the applicant must include a servicing options report and a hydrogeological report.**

Are these reports attached? \_\_\_\_\_

If not, where can they be found? \_\_\_\_\_

**Storm Drainage**

Provisions: \_\_\_\_\_

Proposed Outlet: \_\_\_\_\_

**14. Is the subject land or land within 120 metres of it subject of an application under the Planning Act for:**

Minor Variance ( )      Consent ( )      Official Plan amendment ( )

Zoning By-law amendment ( )      Plan of Subdivision ( )      Site Plan ( )

**If yes to any of the above, indicate the file number, name of approval authority, the land it affects, purpose, status, and effect on this proposed amendment**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**15. How is the proposed amendment consistent with the Provincial Policy Statement 2005?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**16. Are the subject lands within area designated under any Provincial Plan(s)? If the answer is yes, does the proposed amendment conform to the Provincial Plan(s)?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**17. The Owner is required to attach the following information with the application and it will form part of the application. Applications will not be accepted without the following.**

- (a) Survey plan, or a sketch based on an Ontario Land Surveyor description of all lands in the Owner's possession in the vicinity of the subject application with the lands covered by this application outlined in red, and showing the location, size and use of all buildings and structures on the Owner's lands and on all adjacent properties.
  
- (b) Large scale detail plan of the proposed development, showing the location and type of all buildings, setbacks, number and floor area or dwelling units (if applicable) the location of driveways, parking or loading spaces, landscaping areas, planting strips, and other uses.
  
- (c) Written comments from the Elgin St. Thomas Health Unit, Long Point Region Conservation Authority and Ministry of Transportation (if applicable).

**18. If this application is signed by an agent or solicitor on behalf of an applicant(s), the owner's written authorization must accompany the application. If the applicant is a corporation acting without an agent or solicitor the application must be signed by an officer of the corporation and the seal if any must be affixed.**

**19. Additional Information for Council consideration of the application**

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I / We, \_\_\_\_\_, of the \_\_\_\_\_

Name

Town/Township/City/Village etc.

of \_\_\_\_\_, in the county of \_\_\_\_\_, do solemnly declare:

Municipality Name

County Name

- (i) that I / We am / are the owner(s) of the lands described above
- (ii) that to the best of my / our knowledge and belief, all of the information and statements given in this application and in all exhibits transmitted are true.
- (iii) that I /we hereby appoint \_\_\_\_\_ to act as an Agent on my/our behalf in all aspects of this application.

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 \_\_\_\_\_ Owner / Agent

in the County/Region of \_\_\_\_\_ this \_\_\_\_\_

day of \_\_\_\_\_ 20 \_\_\_\_\_ .

Owner / Agent

\_\_\_\_\_  
A Commissioner, etc.