



File No. B \_\_\_\_\_ / \_\_\_\_\_ WELL

**THE CORPORATION OF THE CITY OF WELLAND  
COMMITTEE OF ADJUSTMENT**

**APPLICATION FOR CONSENT**

FOR OFFICE USE ONLY:

**APPLICATION FEES**

CONSENT	\$3,449.00
CONCURRENT CONSENT AND MINOR VARIANCE	\$3,175.00
RESCHEDULING OF CONSENT APPLICATION	\$1,781.00
REGION FEE:	
URBAN IF APPLICABLE	\$645.00
RURAL IF APPLICABLE	\$905.00

DATE RECEIVED: \_\_\_\_\_  
 CITY FEE RECEIVED: \_\_\_\_\_  
 REGION FEE RECEIVED: \_\_\_\_\_  
 OTHER FEE RECEIVED: \_\_\_\_\_  
 DATE OF COMPLETED APPLICATION: \_\_\_\_\_

Please submit original completed application along with all other required information to:

Secretary-Treasurer  
 Committee of Adjustment  
 City of Welland  
 Planning and Development Services  
 Planning Division  
 60 East Main Street  
 Welland, Ontario. L3B 3X4

**NOTE: INFORMATION PROVIDED IN THIS APPLICATION WILL BECOME PART OF A PUBLIC RECORD**

DATE OF APPLICATION: \_\_\_\_\_

1. Registered Owner(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_

2. Authorized Agent (if any) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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

3. Name of Mortgagee/Chargee (if any) \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

4. Address of subject land (number & street name) \_\_\_\_\_

\_\_\_\_\_

5. Legal description of subject land (i.e. lot and registered plan number, lot, concession and township, Reference Plan etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Type and purpose of proposed transaction

- Creation of New Lot
- Disposal of Surplus Farm Dwelling
- Addition to Lot
- Farm Retirement Lot
- Mortgage or Charge
- Partial Discharge of Mortgage or Charge
- Lease
- Right-of-way
- Easement \_\_\_\_\_

(Purpose)

7. If a lot addition, identify the lands to which the parcel will be added

\_\_\_\_\_

\_\_\_\_\_

8. Name of person(s), if known, to whom land or interest in land is intended to be conveyed, leased or mortgaged

\_\_\_\_\_

9. Are there any existing easements or restrictive covenants affecting the land?  Yes  No

If "Yes" describe the easement or covenant and its effect \_\_\_\_\_

\_\_\_\_\_

10. **LANDS TO BE SEVERED** Part No. on sketch \_\_\_\_\_

Frontage \_\_\_\_\_ m Depth \_\_\_\_\_ m

Area \_\_\_\_\_  m<sup>2</sup>  ha

Existing Land Use \_\_\_\_\_ Proposed Land Use \_\_\_\_\_

Type of buildings and/or structures

Existing \_\_\_\_\_

Proposed \_\_\_\_\_

11. **LANDS TO BE RETAINED** Part No. on sketch \_\_\_\_\_

Frontage \_\_\_\_\_ m Depth \_\_\_\_\_ m

Area \_\_\_\_\_  m<sup>2</sup>  Ha

Existing Land Use \_\_\_\_\_ Proposed Land Use \_\_\_\_\_

Type of buildings and/or structures

Existing \_\_\_\_\_

Proposed \_\_\_\_\_

12. Type of access to lands to be Severed

<input type="checkbox"/> Provincial Highway	<input type="checkbox"/> Regional Road
<input type="checkbox"/> Municipal Road maintained all year	<input type="checkbox"/> Other Public Road
<input type="checkbox"/> Municipal Road maintained seasonally	<input type="checkbox"/> Right-of-Way
<input type="checkbox"/> Water Access	<input type="checkbox"/> Private Road

13. Type of access to lands to be Retained

<input type="checkbox"/> Provincial Highway	<input type="checkbox"/> Regional Road
<input type="checkbox"/> Municipal Road maintained all year	<input type="checkbox"/> Other Public Road
<input type="checkbox"/> Municipal Road maintained seasonally	<input type="checkbox"/> Right-of-Way
<input type="checkbox"/> Water Access	<input type="checkbox"/> Private Road

14. If access to the subject land is by water only, indicate the parking and docking facilities to be used and the approximate distance of these facilities from the land and the nearest public road.

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15. What type of water supply is proposed?

<b>TYPE</b>	<b>LANDS TO BE SEVERED</b>	<b>LANDS TO BE RETAINED</b>
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Publicly owned and operated piped water supply	<input type="checkbox"/>	<input type="checkbox"/>
Lake	<input type="checkbox"/>	<input type="checkbox"/>
Well (private or communal)	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/> _____	<input type="checkbox"/> _____

16. What type of sewage disposal is proposed?

TYPE	LANDS TO BE SEVERED	LANDS TO BE RETAINED
Publicly owned and operated sanitary sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Septic system (private or communal)	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/> _____	<input type="checkbox"/> _____

17. Has the subject land ever been the subject of an application for approval of a plan of subdivision under Section 51 of The Planning Act or a consent under Section 53 of The Act?

Yes  No

If "Yes", please provide the following information

File Number \_\_\_\_\_

Decision \_\_\_\_\_

18. Has any land been severed from the parcel originally acquired by the owner of the subject land?

Yes  No

If "Yes", indicate previous severances on the sketch and provide the following information for each lot severed

Date parcel transferred \_\_\_\_\_

Transferee's name \_\_\_\_\_

Land Use of severed parcel \_\_\_\_\_

Consent file number (if known) B \_\_\_\_\_

Legal Description \_\_\_\_\_

19. Is the subject land the subject of any other application under the Planning Act e.g. approval of a plan of subdivision; a consent application; an official plan amendment; a zoning by-law amendment; a Minister's zoning order; a minor variance?

Yes  No

If "Yes", provide the file number and status of the application.

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20. Existing Zoning \_\_\_\_\_ By-law No. \_\_\_\_\_

21. Current designation in the Regional Official Plan \_\_\_\_\_

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22. Current designation in the Official Plan \_\_\_\_\_

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23. Provide an explanation of how the application conforms with the applicable Official Plans.

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24. Provide an explanation of how the application is consistent with Policy Statements issued under subsection 3(1) of the Planning Act.

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25. Is the subject land within an area of land designated under any Provincial Plan or Plans?

Yes

No

If yes, provide an explanation of how the application conforms to or does not conflict with the applicable Provincial Plan or Plans.

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26. Complete the Consent of the Owner concerning personal information set out below

**CONSENT OF THE OWNER TO THE USE AND  
DISCLOSURE OF PERSONAL INFORMATION**

I/We \_\_\_\_\_

am/are the Owner(s) of the land that is the subject of this application for Consent and for the purposes of the Freedom of Information and Privacy Act I/We 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.

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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

- 27. Complete the Authorization for Agent only if Applicant is not the registered Owner

**AUTHORIZATION FOR AGENT**

I/We \_\_\_\_\_  
(PRINT OWNER'S NAME)

the Owner(s) of the subject land hereby authorize

\_\_\_\_\_  
(AGENT)

to act on my/our behalf with respect to this application.

\_\_\_\_\_  
Date

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

\_\_\_\_\_

\_\_\_\_\_

Date

Signature of Owner

28. Affidavit or Sworn Declaration For Requested Information

**AFFIDAVIT OR SWORN DECLARATION**

I/We \_\_\_\_\_

of the City of \_\_\_\_\_

in the Regional Municipality of \_\_\_\_\_

solemnly declare that the information contained in Sections 1 through 13 inclusive of this application is accurate and the information contained in the documents that accompany this application in the respect of the above Sections is accurate and I/We make this solemn declaration conscientiously believing it to be accurate 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 \_\_\_\_\_ )  
\_\_\_\_\_ )  
this \_\_\_\_\_ day of \_\_\_\_\_ )  
A.D. 20 \_\_\_\_\_ )

To be signed in the presence of a  
Commissioner for taking Affidavits.

\_\_\_\_\_  
APPLICANT

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