APPLICATION FOR AMENDMENT TO THE OFFICIAL PLAN IMPORTANT NOTE TO APPLICANTS

- The Application fee for an amendment to the County Official Plan is set by County Council and changes from time to time. The current application fee is \$3,230.00.
 - The fee charged in any given year may be reduced by \$500 where both an Official Plan Amendment and the municipal Zoning By-law Amendment are required.
- Where the Director of Planning determines that a technical study (or studies) is required to justify an application, the applicant is responsible for the cost of these studies. Further, the applicant will be required to reimburse the County for fees and expenses related to the peer review/evaluation of studies submitted by the applicant.
- Where an application to amend the Official Plan is approved by the County and appealed to the Ontario Municipal Board, the County and the applicant shall enter into an agreement with respect to payment of the costs for any subsequent Ontario Municipal Board hearing or hearings.
- All cheques should be made payable to the UNITED COUNTIES OF STORMONT, DUNDAS & GLENGARRY. If you have any questions, please contact the office at (613) 932-1515, Ext. 1246.
- Eighty percent (80%) of the application fee shall be returned to the applicant if an application is rejected by the County as being incomplete or if withdrawn prior to circulation to commenting agencies. This does not include any costs related to newspaper notices or public meetings.
- One application form and fee are required for each Official Plan Amendment.
- Application forms must be filled out clearly and all questions must be completed. If the mandatory information is not provided, the approval authority may refuse to accept or to further consider the application.
- Please note that municipal and Conservation Authority staff may be required to enter upon the subject property for the purpose of conducting site inspections. This will be done during regular business hours during the time that the application is under consideration by the Counties of Stormont, Dundas and Glengarry.



DEPARTMENT OF PLANNING SERVICES

26 Pitt Street, Cornwall, Ontario K6J 3P2 Tel: 613-932-1515 • Fax: 613-936-2913 • Email info@sdgcounties.ca • www.sdgcounties.ca

Official Plan Amendment Application

Under Section 22 of the *Planning Act* Ontario Regulation 543/06

<u>All questions</u> must be completed, in <u>ink or typewritten</u>, or the application will be deemed incomplete and will not be accepted. Please print clearly.

1. Registered	d Owner(s):					
Address:		City: _		Postal	Code:	
Email:			Primary fo	rm of contac	ct?Ye	s _ No
	Alternate:			_		
	blicant(s) (if different from above):					
Address:		City: _		Postal	Code:	
Email:			Primary fo	rm of contac	ct?Ye	s No
	Alternate:					
	thorized Agent (if applicable):					
Address:		City: _		Postal	Code:	
Email:			Primary fo	rm of contac	ct?Ye	s No
Phone:	Alternate:			Fax:		
Please specif	y the person to be contacted if more in Il be directed to this person:					
	Registered Owner(s)	olicant(s)		Authorized A	gent	
	: The owner's authorization, page 4 o by a person, or persons, other than the			orm, is requi	red if the a	pplication
5. Have you	discussed this application with the	Local Mu	inicipality?			
	Ye	es [No]	

2. a)	Location of Subject	Land(s):					
	Municipality:						
	Geographic Townsh	ip/Village:					
	Concession Number				_ot Number(
	Registered Plan No.	:			_ot(s)/Block		
	Reference Plan No.:				Part Number		
	Name of Street or Ro						
b)	What is the approxir						
	Frontage:	Dept	th:		Area	:	
3. Doe	es the proposed officia	al plan amendr	nent add o	or change	a designatio	on in the o	fficial plan?
			Yes		No		
lf y	es, please answer the	following:					
	Current designation	:					
	Requested designat	ion:					
	Reason for change:	(Add additional	pages if ne	eeded)			
4. Doe	es the proposed amen	dment change,	replace, o Yes	delete or a	dd a policy No	in the offic	cial plan?
If yes	, what is the policy to I	be changed, re		eleted?			
delete	ase provide the wordined or added. If you are not or added or added or added or added or a second or a second m	unclear as to th	e wording	j, please in	dicate you v		

7. What is	s the existing land use on the	site?				
8. What is	s the proposed land use(s) for	the subject p	roperty? (I	Please be sp	ecific)	
9. What la	and uses are adjacent to the s	ite?				
N	orth				_	
S	outh				_	
E	ast				_	
v	/est				_	
subdivisi If yes, pr A T	on for an official plan amend ion, consent or site plan? ovide the following informatio pplication File No: he Municipality considering th he lands affected by the applic	Yes n: ne application:		No		
- т	he purpose of the application:					
	he status of the application: _					
11. Are th	ne lands serviced by municipa	l services?				
	Municipal Water:	Yes		No		
	Municipal Sewer:	Yes		No		

12. Please list any supporting studies that will be submitted with your application:

Exp	Please provide justification/reasons w blain why it is in the Municipality's inte ated reasons: (Submit additional pages if ne	rest to					
14.	Is the proposed Amendment consistent	with the	current P	rovincial I	Policy S	tateme	nt?
		Yes		No			
	Please describe your proposed strategy f sure, please consult County staff for gene						
16.	AUTHORIZATION: If the applicant is n application, the written authorization of application on their behalf must be inclu set out below, must be completed by the	the owr ded wit	ner that the h this form	applican or altern	t is auth	norized	to make this
	l/We,				being	the	Registered
	Owner(s) of the land(s) that are the sub			, ation for	-		-
							plication on
	my/our behalf.					-	-
		_					
	Date	Signa	ture of Reg	gistered C	wner(s)		
		Signa	ture of Reg	gistered C	wner(s))	

17. <u>SWORN DECLARATION:</u> This must be completed by the Applicant(s) for the proposed official plan amendment.

	wner(s)/Applicant/Authorized Agent)
(City/Town/Township, etc.)	, in the, (County/Region/District/Municipality)
do solemnly declare that all the stater	ments contained in this Application for Consent for
(Prope	rty Description)
and all supporting documents are	true, and I/We make this solemn declaration
conscientiously believing it to be true a	and complete, and knowing that it is of the same force
	• • •
and effect as if made under oath, by virt	tue of the "Canada Evidence Act".
worn (or Declared) before me:	
the,	
	(signature Registered Owner(s)/Applicant/Authorized Agen
the.	(signature Registered Owner(s)/Applicant/Authorized Agen
the,	
the, is day of,	
	(signature Registered Owner(s)/Applicant/Authorized Agen (signature Registered Owner(s)/Applicant/Authorized Agen
is day of,	
is day of,	
is day of,	

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, will be part of the public record and will also be available to the general public.

Owner(s)/Applicant/Authorized Agent Signature

Date