



11 Hudson Street, Blind River, Ontario, P0R 1B0

**Planning Department
Application for Deeming By-Law**

Tel.: (705)356-2251 Fax.: (705)356-7343

FEE: \$305.00

For use by the Town of Blind River	
Date Received:	For Reference Purposes:

Application submitted to : The Corporation of the Town of Blind River

Concurrent Application Filed
Note to Applicant: For each application that is filed concurrently, complete and attach the appropriate application form and fees.
<input type="checkbox"/> Zoning By-law Amendment
<input type="checkbox"/> Consent/ Severance
<input type="checkbox"/> Site Plan Control
<input type="checkbox"/> Other (Specify)

Requirements for a Complete Application Include:
Note: Until the Town of Blind River, Planning Dept. has received the information and material requested herein, the application will deemed incomplete and the application will be returned to the applicant.
<input type="checkbox"/> The completed application form and declarations.
<p>1 copy of sketch/plan (to scale), showing EXISTING and PROPOSED building(s) and structure(s) on subject lands. Sketch/plan must include the following:</p> <ul style="list-style-type: none"> - The boundaries and dimensions of the subject lands; - The approximate location of all natural and artificial features (for example, buildings, railways, roads, watercourses, drainage ditches, banks of rivers or streams, wetlands, wooded areas, wells and septic tanks) that; <ul style="list-style-type: none"> - are located on the subject <u>and</u> adjacent lands; and - in the applicant's opinion, may affect the application; - The current uses of land that is adjacent to the subject land; - The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public traveled road, a private road or right of way; - If access to the subject land is by water only, the location of the parking and docking facilities to be used; and - The location and nature of any easement or restrictive covenant affecting the subject land.
<input type="checkbox"/> Application Fee(s) made payable to the Corporation of the Town of Blind River
<input type="checkbox"/> A Letter of Authorization from the Owner (with dated, original signature) OR completion of the Owner's Authorization on page 5 (item 14), if the Owner is not filing the application.
<input type="checkbox"/> Other information identified at the pre-application consultation meeting.

Please List any Reports or Studies that Accompany this Application (supply two copies of each)

1. Application Information

Complete the information below. All communication will be directed to the **Primary Contact** with a copy of to the Owner.

Registered Owner(s)

Last name:	First name:
Address:	
City:	Postal Code:
Phone:	Alternate Phone:
Fax:	E-mail:

Applicant (complete if the Applicant is not the Owner)

Last name:	First name:
Address:	
City:	Postal Code:
Phone:	Alternate Phone:
Fax:	E-mail:

Agent Authorized by the Owner to file the Application (if application)

Last name:	First name:
Address:	
City:	Postal Code:
Phone:	Alternate Phone:
Fax:	E-mail:

2. Which of the above is the Primary Contact?

<input type="checkbox"/> Owner	<input type="checkbox"/> Applicant	<input type="checkbox"/> Agent
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3. Official Plan Designation

Current Official Plan designation:

4. Zoning Information

Current Zoning:

5. Legal Description

Geographic Township:		
Lot(s):	Concession:	Parcel(s):
Mining Claim(s):	Registered Plan Number:	
Municipal Street Address (if applicable):		
Assessment Roll Number:		

6. Are there any easements or restrictive covenants affecting the subject land:

<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please list the description of each easement or covenant and its effect:	

7. Land Description	
Lot One:	Lot Two:
Frontage (m):	Frontage (m):
Depth (m):	Depth (m):
Area (m2 or ha):	Area (m2 or ha):
Existing use(s) of the property:	
The date the subject land was acquired:	
The type and number of existing building(s)/ structures:	
The type and number of proposed building(s)/ structures:	
The proposed use of subject land:	

8. Access	
<input type="checkbox"/> Private Road (not usually permitted)	<input type="checkbox"/> Assumed Municipal Street/ Road
<input type="checkbox"/> Right of Way (not permitted)	<input type="checkbox"/> Water
<input type="checkbox"/> Provincial Highway	<input type="checkbox"/> Other (Specify)
If by water, please list the parking and docking facilities used or proposed to be used as well as the approximate distance from the subject lands and the nearest public road.	

9. Water Supply	
Water supply on the subject lands shall be provided by:	
<input type="checkbox"/> Municipal piped water	<input type="checkbox"/> Privately owned & operated individual wells for each lot
<input type="checkbox"/> Privately owned & operated communal well	
<input type="checkbox"/> Other (specify):	

10. Sewage Disposal	
Sewage disposal on the subject lands shall be provided by:	
<input type="checkbox"/> Municipal sanitary sewer	<input type="checkbox"/> Privately owned individual septic system for each lot
<input type="checkbox"/> Privately owned communal collection	
<input type="checkbox"/> Other (specify):	
If the application would permit development on privately owned and operated individual or communal septic systems, and more than 4,500 litres of effluent produced per day as a result of the development being completed, a <i>service options report and a hydrogeological report is required</i> . If greater than 10,000 litres of effluent is produced per day, then approval from MOE is required.	

11. Storm Drainage		
Storm drainage on the subject property will be provided by:		
<input type="checkbox"/> Municipal sewers	<input type="checkbox"/> Ditches or Swales	<input type="checkbox"/> Other (specify)

12. Other Applications Under the Planning Act	
Has the property ever been subject to an application under Act?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If the answer is 'yes', please indicate the file number and status of the application.	
Has any land been severed from the parcel originally acquired by the owner of the subject land?	
If the answer is 'yes', please indicate the date of the transfer, the name of the transferee and the uses of the severed land.	

13. Owner's Authorization

This must be completed by the Owner if the OWNER IS NOT FILING THE APPLICATION.

Note: If there are multiple Owners, an authorization letter from each Owner (with dated, original signatures) is required OR each Owner must sign the following authorization.

I, (we) _____, being the
(Print name(s) of Owner, individual or company)

registered Owner(s) of the subject lands, hereby authorize _____
(Print name of agent and/or company (if applicable))

to prepare and submit an application for Deeming By-Law.

Signature

Date

Signature

Date

IMPORTANT

If the Owner is an incorporated company, the company seal shall be applied in the signature block above.

14. Declaration

This must be completed by the person filing the application for the proposed deeming by-law and in the presence of Commissioner of Oaths.

I, _____ of the _____
(Print name of applicant) Print (Name of City, Town, Township, etc.)

in the District of _____ solemnly declare that all of the statements
(Print Region/Country/District)

contained in this Application for Deeming By-Law at _____
(description of subject land)

and all supporting documents and plans are true and complete, and I 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*.

Signature

Date

Please Print Name of Applicant

Commissioner of Oaths

15. Municipal Freedom of Information Declaration

In accordance with the provisions of the Planning Act, it is the policy of the Town Planning Department to provide public access to all development applications and supporting documentation.

In submitting this development application and supporting documentation, I (we) _____ (please print name) the Owner/applicant/authorized agent, hereby acknowledge the above-noted policy and provide my/our consent, in accordance with the provisions of the Municipal Freedom of Information Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agent, consultants and solicitors, will be part of the public record and will also be available to the general public.

Signature

Date

Signature

Date

OWNER/ APPLICANT'S INFORMATION: (Mandatory, please print)

Name: _____ Mailing Address: _____

Telephone No: _____

Email Address: _____

Fax No. _____

Information to be submitted:

1 electronic copy of drawings/surveys (in Auto CAD and pdf formats)

1 hard copy of drawings/surveys no smaller than 11" x 17"