



File No. B _____ / _____ WELL

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

**THE PLANNING ACT - SECTION 53
APPLICATION FOR CONSENT**

**(NOTE: PRIOR TO COMPLETING THIS FORM THE APPLICANT SHOULD
READ THE ATTACHED SUBMISSION REQUIREMENTS)**

FOR OFFICE USE ONLY:

APPLICATION FEES

CONSENT	\$1,000.00
CONCURRENT CONSENT AND MINOR VARIANCE	\$1,400.00
RESCHEDULING OF CONSENT APPLICATION	\$400.00
REGION FEE:	
URBAN, IF APPLICABLE	\$325.00
RURAL, IF APPLICABLE	\$525.00
DATE RECEIVED: _____	
CITY FEE RECEIVED: _____	
REGION FEE RECEIVED: _____	
OTHER FEE RECEIVED: _____	
DATE OF COMPLETED APPLICATION: _____	
APPLICATION REVIEWED BY: _____	
DATE: _____	

Please submit one (1) copy and one (1) electronic copy, if required, of a 'completed' application together with the required fee(s) and other required information

To: City of Welland
Secretary-Treasurer
Committee of Adjustment
60 East Main Street
Welland, Ontario. L3B 3X4
Telephone: 905-735-1700
Fax: 905-735-8772
www.welland.ca

PLEASE TYPE OR USE BLACK INK

DATE OF APPLICATION: _____

1. (a) Registered Owner(s): _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____ Fax: _____

Email: _____

(b) Owner's Solicitor (if any): _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____ Fax: _____

Email: _____

(c) Authorized Agent (if any): _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____ Fax: _____

Email: _____

(d) Name of Mortgagee/Chargee (if any): _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____ Fax: _____

(e) Please specify to whom all communications should be sent:

- Owner
- Solicitor
- Agent

2. Location of subject land: Legal Description _____

(Lot No., Registered Plan No., Concession, Reference Plan, etc.)

Street Address _____

3. (a) Type and purpose of proposed transaction: (Check appropriate space(s))

- 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)

(b) If a lot addition, identify the lands to which the parcel will be added:

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

4. Are there any existing easements or restrictive covenants affecting the land?

- Yes
- No

If "Yes" describe the easement or covenant and its effect: _____

5. Description of land subject to consent: Part No. on sketch _____

(a) Frontage _____ m Depth _____ m

Area _____ m² ha

(b) Existing Use _____ Proposed Use _____

(c) Buildings and/or structures on the lands subject to consent:

Existing: _____

Proposed: _____

6. Description of land to be retained: Part No. on sketch _____

(a) Frontage _____ m Depth _____ m

Area _____ m² Ha

(b) Existing Use _____ Proposed Use _____

(c) Buildings and/or structures on the lands to be retained:

Existing: _____

Proposed: _____

7. (a) Type of access to lands subject to consent:

- Provincial Highway
- Municipal Road maintained all year
- Municipal Road maintained seasonally
- Water Access
- Regional Road
- Other Public Road
- Right-of-Way
- Private Road

(b) Type of access to retained land:

- Provincial Highway
- Municipal Road maintained all year
- Municipal Road maintained seasonally
- Water Access
- Regional Road
- Other Public Road
- Right-of-Way
- Private Road

8. 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.

9. What type of water supply is proposed? (Check appropriate space)

TYPE	LANDS TO BE SEVERED	LANDS TO BE RETAINED
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"/> _____

10. What type of sewage disposal is proposed? (Check appropriate space)

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"/> _____

11. (a) Current designation of the subject land in the Regional Policy Plan: _____

(b) Current designation of the subject land in the Official Plan: _____

(c) Existing zoning of the subject land: _____ By-law No.: _____

12. (a) 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

(b) If the answer to (a) is "Yes", please provide the following information:

File Number _____

Decision _____

13. (a) Has any land been severed from the parcel originally acquired by the owner of the subject land?

Yes

No

(b) If the answer to (a) is "Yes", please indicate previous severances on the required sketch and supply the following information for each lot severed:

Grantee's (Purchaser's) name _____

Land Use on severed parcel _____

Date parcel transferred _____

Consent file number (if known) B _____

Legal Description _____

14. (a) 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

(b) If the answer of (a) is "Yes", give the file number and status of the application.

15. Is the application consistent with Policy Statements issued under subsection 3(1) of the Act?

Yes

No

If no, explain.

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

Yes

No

If yes, indicate whether the application conforms to or does not conflict with the applicable Provincial Plan or Plans.

17. 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.

- 18. 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

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

AUTHORIZATION FOR AGENT

I/We _____
(PRINT NAME)

the Owner(s) of the subject property hereby authorize

(AGENT)

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

Date Signature of Owner

Date Signature of Owner

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