



THE CORPORATION OF THE CITY OF WELLAND
APPLICATION FOR ZONING BY-LAW AMENDMENT

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

FOR OFFICE USE ONLY:	
APPLICATION FEES	
ZONING BY-LAW AMENDMENT	\$2,700.00
CONCURRENT ZONING BY-LAW AND OFFICIAL PLAN AMENDMENT	\$4,100.00
REGIONAL MUNICIPALITY OF NIAGARA	\$575.00
DATE RECEIVED:	_____
CITY FEE RECEIVED:	_____
REGION FEE RECEIVED:	_____
OTHER FEE RECEIVED:	_____
DATE OF COMPLETED APPLICATION:	_____
APPLICATION REVIEWED BY:	_____
DATE:	_____

Please submit one (1) copy of a 'completed' Application together with the required fee(s) payable to the "City of Welland", and other required information.

NOTE: If fee(s) are required for Regional Niagara or the Niagara Peninsula Conservation Authority please submit required fee(s) with Application.

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

PLEASE NOTE: In accordance with Section 34(10.1) of The Planning Act and Ontario Regulation 545/06 the attached information must be provided. Should this Application not be completely filled out and the required fee and information not be provided, the Application shall be returned.

PLEASE TYPE OR USE BLACK INK

DATE OF APPLICATION: _____

1. Name of Applicant: _____

Address: _____ Phone Number: _____

_____ Fax Number: _____

Email: _____

2. Name of Owner: _____

(if not same as above)

Address: _____ Phone Number: _____

_____ Fax Number: _____

Email: _____

3. Name of Agent: _____

(if any)

Address: _____ Phone Number: _____

_____ Fax Number: _____

Email: _____

[An Agent, other than the Owner's Solicitor, must have written authorization from the Owner(s).]

4. To Whom is all Information to be Sent?

- Applicant
- Owner
- Agent
- All

5. Name of Mortgagee/Chargee: _____
(if any)

Address: _____

6. What is the Current Official Plan Designation of the land and how does the application conform to the Official Plan?

7. Existing Zoning of Lands: _____ By-law: _____

8. Proposed Zoning:

List the proposed zoning category. If a Site Specific Zone is being requested, which may or may not include exemptions to existing requirements (i.e. setbacks, frontages, lot coverage, etc.), list all exemptions requested.

(if more space is required, attach additional sheet)

9. Is the subject land within an area where the municipality has pre-determined the minimum and maximum density requirements or the minimum and maximum height requirements? If Yes, provide a statement of these requirements.

- Yes
- No

10. Location of Property: Legal Description _____

(Concession and Lot Numbers, Registered Plan and Lot Numbers, Reference Plan and Part Numbers)

Street Address: _____

11. Size of Property: Frontage _____ Metres Lot Depth _____ Metres
Area _____ Square Metres Hectares

12. Does the application implement an alteration to the boundary of an area of settlement or implement a new area of settlement? If Yes, provide details of the Official Plan or Official Plan Amendment which deals with the matter.

- Yes
- No

13. Does the application remove land from an area of employment? If Yes, provide details of the Official Plan or Official Plan Amendment which deals with the matter.

- Yes No

14. Is the subject land within an area where Zoning with Conditions may apply? If Yes, indicate how the Application conforms to the Official Plan Policies relating to Zoning with Conditions.

- Yes No

15. Type of access to subject lands?

- Provincial highway Other public road
 Municipal road maintained all year Right-of-way
 Municipal road maintained seasonally Water access

16. If access to subject land is by water only, describe parking and docking facilities used or to be used and the approximate distance between these facilities from the subject land and the nearest public road.

17. a) Existing Land Use: _____

18. a) Are there any existing buildings or structures on the subject land?

- Yes No

b) If answer to (a) is Yes, please fill out the following:
 (metric units required)

	BUILDING 1	BUILDING 2	BUILDING 3
Type (i.e. House, Garage, Commercial Building, Accessory)			
Front Yard Setback	m	M	M
Rear Yard Setback	m	m	M
Side Yard Setback	(N,S,E,W) m	(N,S,E,W) m	(N,S,E,W) m
Side Yard Setback	(N,S,E,W) m	(N,S,E,W) m	(N,S,E,W) m
Height	m	m	M

Ground Floor Area	m ²	m ²	m ²
Gross Floor Area	m ²	m ²	m ²

19. Proposed Land Use: _____

20. a) Are there any buildings or structures proposed to be built or erected on the subject land?
 Yes No
- b) If answer to (a) is Yes, please fill out the following:
 (metric units required)

	BUILDING 1	BUILDING 2	BUILDING 3
Type (i.e. House, Garage, Commercial Building, Accessory)			
Front Yard Setback	m	m	m
Rear Yard Setback	m	m	m
Side Yard Setback	(N,S,E,W) m	(N,S,E,W) m	(N,S,E,W) m
Side Yard Setback	(N,S,E,W) m	(N,S,E,W) m	(N,S,E,W) m
Height	m	m	m
Ground Floor Area	m ²	m ²	m ²
Gross Floor Area	m ²	m ²	m ²

21. The date the subject land was acquired by the current Owner: _____

22. The date any existing buildings or structures were constructed on the subject land.
 Building 1 _____ 2 _____ 3 _____
 (refer to 18 b)

b) The length of time that the existing uses of the subject land have continued: _____

23. What type of water supply exists or is proposed?
 Publicly owned and operated piped water system Lake or other water body
 Privately owned and operated individual or communal well Other (specify) _____

24. What type of sewage disposal exists or is proposed?
 Publicly owned and operated sanitary sewage system
 Privately owned and operated individual or communal septic system - see **NOTE** below
 Other (specify) _____

NOTE: If a privately owned and operated individual or communal septic system is proposed and more than 4500 litres of effluent would be produced per day as a result of the development being completed, a Servicing Options Report and a Hydrogeological Report shall be provided.

25. What type of storm drainage is provided?
 Sewers Swales
 Ditches Other (specify) _____

26. If known, whether the subject land has ever been the subject of an Application under the Act for the following and the status of the Application:

APPLICATION	IF YES - FILE NUMBER	STATUS
• Zoning By-law Amendment		
• Minister's Zoning Order (provide Ontario Regulation number of Order)		
• Minor Variance		
• Plan of Subdivision		
• Consent		
• Site Plan Control		
• Official Plan Amendment		

If Yes to any of the above, provide the name of the approval authority, the lands affected, status of the application and the effect of the application on the proposed amendment.
(PLEASE USE SEPARATE SHEET)

27. Existing Adjacent Land Uses:

North _____
 East _____
 South _____
 West _____

28. Are any buildings designated under the Ontario Heritage Act? _____

29. Explain how your proposal is consistent with Provincial Policy Statements issued under Section 3(1) of the Planning Act. (Copies may be obtained from the Publication Ontario Bookstore (1-800-668-9938)).

30. Is the subject land within an area of land designated under any Provincial Plan or Plans? If Yes, indicate whether the application conforms to or does not conflict with the applicable Provincial Plan or Plans.

Yes No

31. Affidavit or Sworn Declaration For Requested Information

AFFIDAVIT OR SWORN DECLARATION

I, _____
(PRINT NAME OF APPLICANT)

of the City of _____

in the Regional Municipality of _____

make oath and say (or solemnly declare) that the information contained in Sections 1 through 25 inclusive of this Application is accurate and that the information contained in the documents that accompany this Application in respect of the above Sections is accurate.

Sworn (or 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.

32. 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, _____

am the Owner of the land that is the subject of this Application for approval of an Amendment to the Zoning By-law and for the purposes of the Freedom of Information and Privacy Act I 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

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

AUTHORIZATION FOR AGENT

I, _____ the Owner of the subject property hereby
(PRINT NAME)

authorize _____ to act on my behalf with respect to this
(AGENT)

Application.

Date

Signature of Owner

Date

Signature of Owner

NOTE: Information provided in this Application will become part of a public record.