



Preliminary Zoning Review Application

This is NOT a permit.
Please PRINT clearly.

Applicant and Owner Information

If you are not the owner, please refer to Schedule A: Owner's Authorization Form

I am the Owner Applicant/Agent

Name _____

Company Name _____

Mailing Address _____

Telephone Number _____

Email Address _____

And I hereby declare that:

I understand this review does not relieve the owner from complying with
the Ontario Building Code act, all applicable by-laws and regulations;

I understand this review does not give me permission to begin
construction without obtaining all approvals and applicable permits;

The information provided herein is accurate to the best of my knowledge.

(Name printed)

(Signature)

(Date)

The Corporation of the Township of Cramahe

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Project Information

Legal Description Lot _____ Con _____ Plan _____

Civic Address _____

Roll Number 1411 - _____

Building Dimensions _____ FT² _____ M²

Building Height _____ FT² _____ M²

Distance from finished floor to grade _____ FT² _____ M²

Height of building means the vertical distance, measured between the finished grade at the front of the building, and;

- (a) *In the case of a flat roof, the highest point of the roof surface*
- (b) *In the case of a mansard roof, the deck roof line; and*
- (c) *In the case of a gable, hip or gambrel roof, the average height between the eaves and the ridge.*

Type of Application (Please indicate category and type of structure by checking the boxes below).

New Construction

Single Detached Dwelling	Garage	Shed
Commercial Building	Institutional Building	In-Ground pool
Above-ground pool	Converted Dwelling	Duplex
Semi-Detached Dwelling	Apartment Building	Multi-Unit Building
Row Dwelling	Agricultural Building	Deck
Agricultural (Equipment Shed)	Agricultural Building (with livestock)	

Renovation

Addition

Single Detached Dwelling	Industrial Building	Commercial Building
Agricultural Building	Agricultural Building (with livestock)	

Additional Residential Unit

PLEASE REFER TO SCHEDULE B IF APPLYING FOR ARU

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Detailed description of use of structure:

Site Plan

A site plan must be provided with the following information clearly detailed. Please refer to the attached example for clarification.

Site plan drawn neatly and to scale

All structures on the property are shown and identified

Setbacks to all structures and proposed structures to be shown from lot lines.

Setbacks must show dimensions to the front, rear and side yard setbacks.

Location of Septic system (tank and bed) – if applicable**

Distance from proposed structure to the tank and bed

Dimensions of all structures

Driveway location

Well location (if applicable)

Swales showing direction of drainage away from the building

Location of any unopened road allowances

Identify the name of the road

North arrow indicator

Lot Dimensions

*** If you do not know where your septic system is located, please reach out to the County of Northumberland Plumbing and Septic Department to obtain accurate information. They can be reached at 905-372-1929.*

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Schedule A – Owner’s Authorization Letter

If the applicant is not the owner of the land that is subject to development, the following written authorization of the owner that the applicant is authorized to make an application must be included.

I, _____, am the owner of the property that is
subject to development and I authorize _____
to make this application on my behalf.

(Date)

(Signature of Owner)



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Schedule B – Additional Residential Units (ARU)

Additional Residential Unit

PLEASE REFER TO SCHEDULE B IF APPLYING FOR ARU

New Construction (Addition)

New Construction (Accessory Building with ARU)

Within Existing Accessory Building

Within Existing Dwelling (Apartment/In-law Suite)

Detailed description of use of structure:

of bedrooms being created: _____ # of bathrooms being created: _____

of parking spaces being provided: _____

Size of existing dwelling gross floor area _____ FT² _____ M²

Size of proposed ARU gross floor area _____ FT² _____ M²

(Minimum 800 Square Feet / Maximum 1,200 Square Feet)

ARU BY-LAW REQUIREMENT CHECKLIST

Shared Driveway (shown on site plan)

Dedicated ARU entrance

Maximum 70% of the primary dwelling size

Within 50 meters of primary dwelling

Well Test must be provided with building permit application to show that existing well can provide sufficient water to both dwellings

If applicable, location of existing well, septic tank and bed on the property indicated on site plan and verification from the County of Northumberland that the existing septic system can support new ARU.

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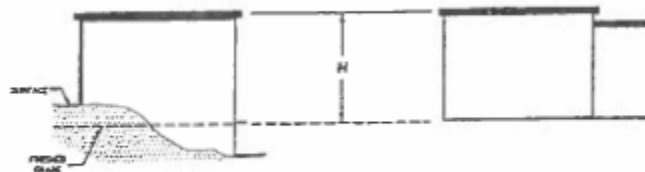


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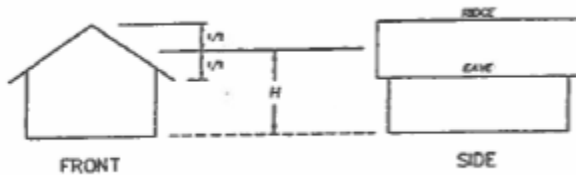
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Schedule C – Roof Pitch Types

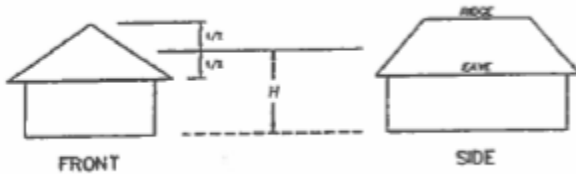
H = Height of the Building



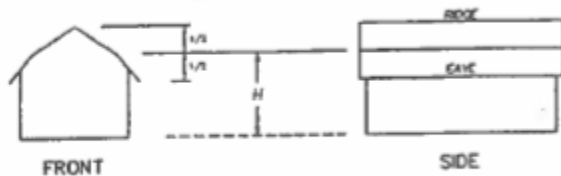
FLAT ROOF



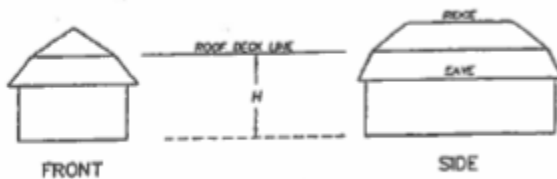
GABLE ROOF



HIP ROOF



GAMBREL ROOF



MANSARD ROOF

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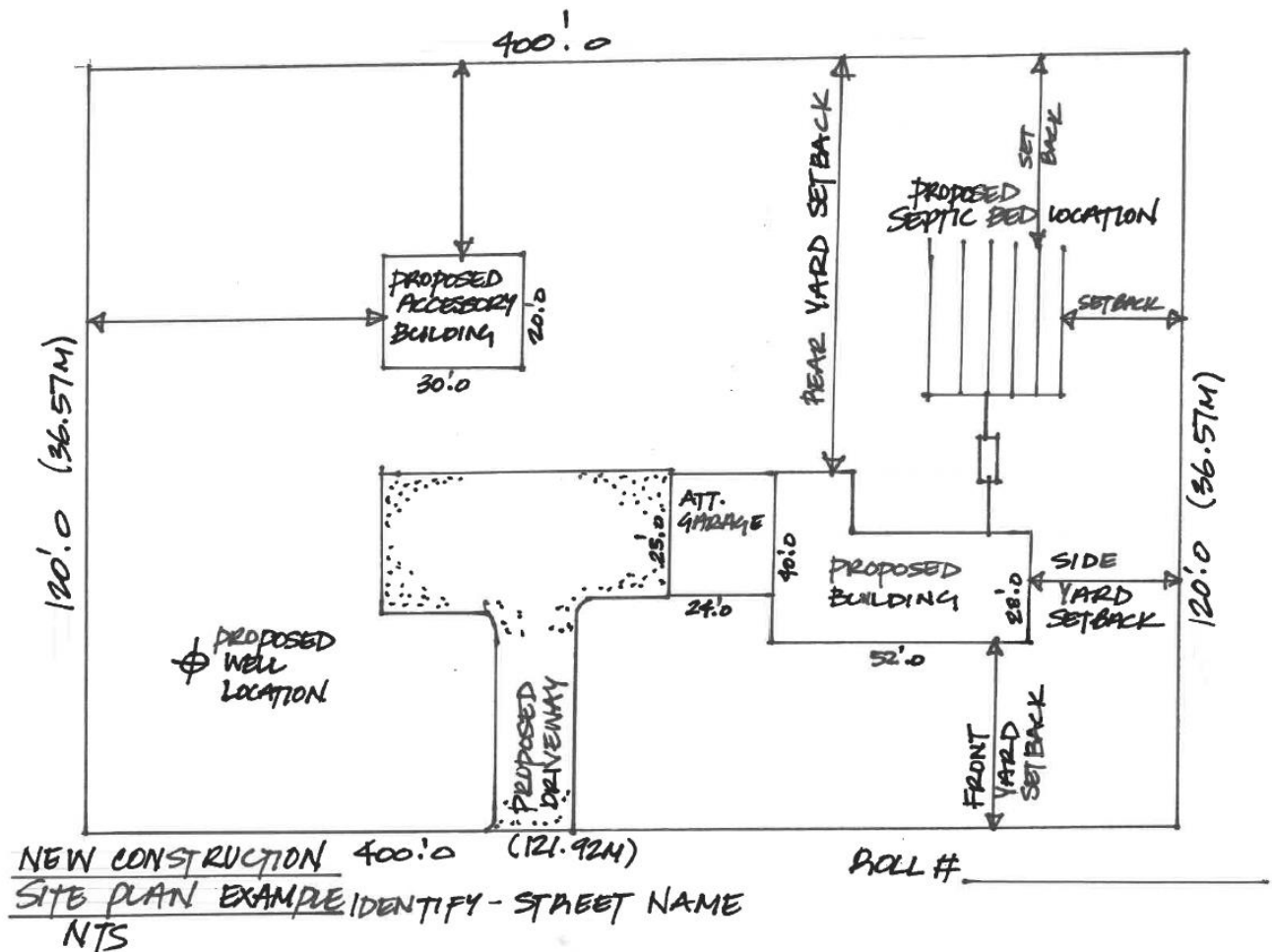
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Schedule D – Site Plan Example – New Construction



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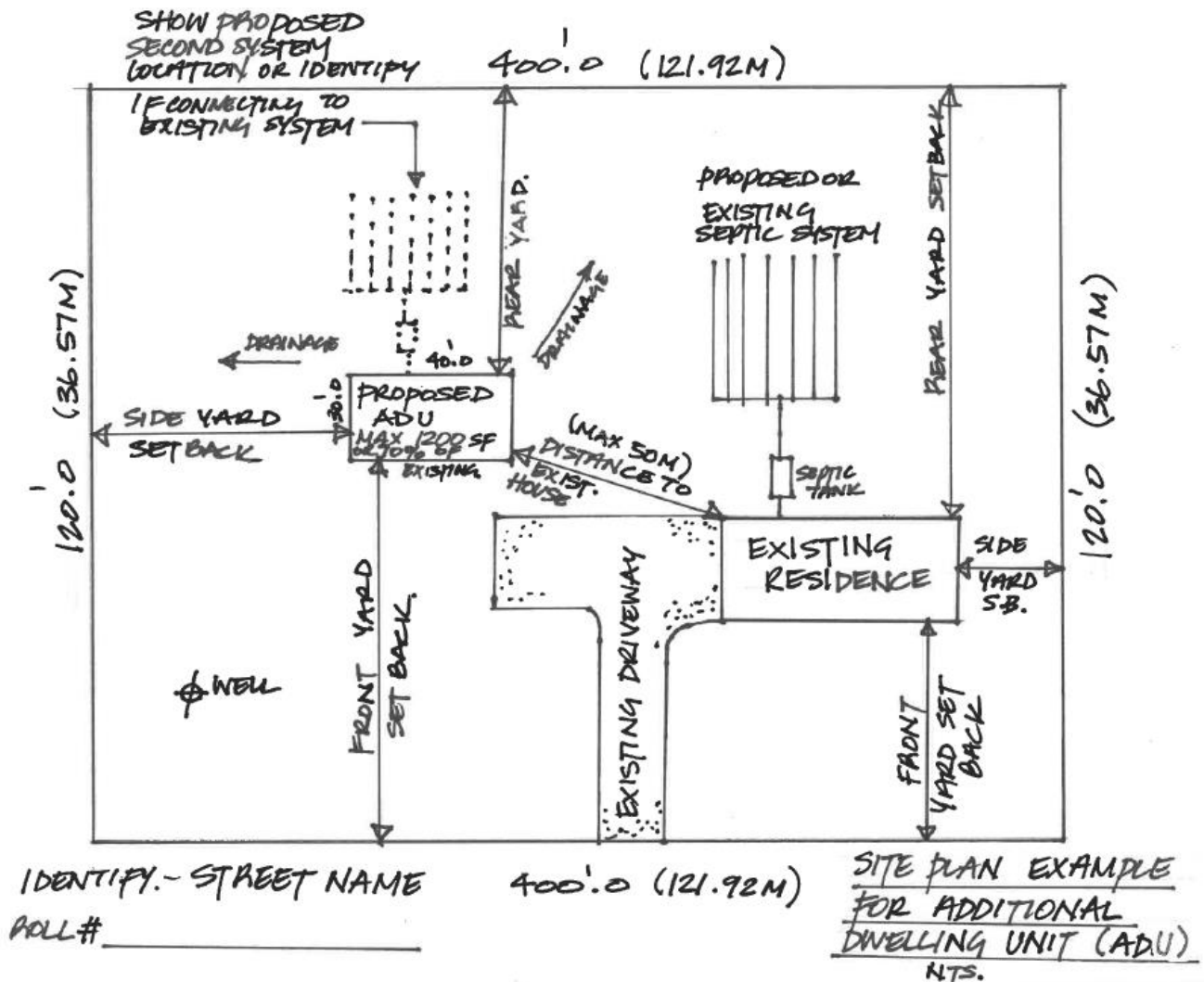
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Schedule D – Site Plan Example – Additional Residential Unit



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