# PLEASE DO NOT REMOVE ANY PAGES FROM THIS DOCUMENT PLEASE PRINT LEGIBLY USING BLUE OR BLACK INK



Office Use Only	Submission Date:
File Number: D10-	Date Deemed Complete:
Roll #: 1411	Meeting Date:

## **Application for Consent**

Complete applications must include all fees. *Note: Fees are non-refundable.*Incomplete applications will not be accepted and will be retuned to the Applicant / Agent.

	Pre-consultation Reference #:	
	A professional sketch in metric prepared by an Ontario Land Surveyor is enclosed. (see	
_	Section 18)	
	Proof that the lot existed in its present form prior to January 1, 1985, is enclosed (a copy of current deed and a survey predating January 1, 1985, or the PIN sheet, or a title search performed by legal counsel).	the
	It is acknowledged that a site visit will likely be conducted by members of the Committee of	
_	Adjustment, Staff, and/or other agents. By signing below, the owner agrees to allow these agents, staff, committee and/or Council members access to the property in the review of this application. It is acknowledged that the proposed severed and retained lots must be clearly staked prior to any site visits.	
	It is acknowledged that the members of Committee of Adjustment must hear all information	at
_	the public meeting without prejudice and therefore, must not discuss any applications prior t meeting.	
	If applicable a Minimum Distance Separation calculation has been submitted (See Section 7 page 6)	7,
	If the property in question is held in joint tenancy, both parties must sign the application in the presence of a Commissioner of Oaths (See Section 19, page 10)	те
	If the owner is not the applicant, written authorization to the applicant is required and enclos (See Attachment 1, page 11)	ed.
	Ensure that all sections in the application forms are completed.	
	Applicant acknowledges that they will be required to post a sign on the property for a minim of 14 days prior to the public hearing date.	um
	All applicable supporting documents have been submitted. (EIS, etc.)	
	Date Signature of Owner	



# The Corporation of the Township of Cramahe Application for Consent

As per the Planning Act, as amended, the Municipal Act 2001, as amended and in accordance with the Provincial regulations.

### Instructions to applicant, please read carefully before completing the application.

A. It is the policy of The Township of Cramahe that a separate application with applicable fees be submitted for **each** consent transaction.

To make an application, complete and file one (1) signed original application forms together with one (1) copy of all supporting documents, and one (1) professional sketch depicting the severed and retained lands. The submitted professional sketch must be completed by an Ontario Land Surveyor (OLS).

All supporting documents and sketches can be submitted in digital form.

Note to applicant: All questions (unless otherwise indicated) in the application must be completed in full otherwise the application will not be deemed complete and returned to you. Please mark all irrelevant sections Not Applicable (N/A).

B. In accordance with the Township of Cramahe's Fees and Charges By-Law, application processing fees apply at the time of submission.

To obtain the most up to date fees information contact the Planning Department at:

905-355-2821 ext: 227 or 242

or visit our website <a href="http://www.cramahe.ca">http://www.cramahe.ca</a> → Municipal Government → Planning and Land Use → Planning Fee Schedule

- C. The Undersigned hereby applies to the Township of Cramahe under the Planning Act, as amended for consent to the transaction as described, and to the extent set forth in this application.
- D. Please note the application together with any and all documents related thereto are a public record and as such are available for viewing or duplication by the general public.

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# The Corporation of the Township of Cramahe Application for Consent

1. Owner and Applicant Information		
	or the owner's agent, duly authori mation below (please print legibly	zed in writing, may apply for consent.
·	Owner #1:	Owner #2:
Name:		
Address:		
City/Postal Code:		
Phone:		
Email:		
	Authorized Agent:	Primary Contact:
Name:		
Address:		
City/Postal Code:		
Phone:		
Email:		
	ction: Indicate for which applicationly one (1) of the following:	n for consent is being made:
a) Creation of new lot Are you requesting a Certificate Stamp for both the severed and retained lands?  Yes No		
Please note that if	you answer "Yes", an <u>additional</u>	Certificate Stamping Fees may apply
b) Addition	to a lot – moving/adjusting lot line	s
_	o which the severed parcel will be O East O South O West	added:
Note: For Lot Line	e Adjustments only, please also	complete the section below:
Name, address, ar	nd phone number of the person(s)	to whom the land is intended to be transferred.
Name: _		
Mailing Address: _		
Phone: _		
Assessment Roll N	lumber of Benefiting Property: 14	11

Other transaction types (please select if applicable)  c) Easement/Right-of-way (Identify the benefiting lands – North/East/South/West)			
d) Lease	d) Lease		
e) Correction of Title			
f) Mortgage or Charge			
g) Other e.g. Validation Certi	ficate, Approval of Power of Sale		
3. Property Information of Subj	ect Lands:		
Legal Description including Lot ar	nd Concession:		
Municipal Address, if applicable:			
Assessment Roll Number: 1411			
4. Existing easement/rights-of-ways or covenants:			
O Yes O No			
If Yes, please describe below in o	detail:		
<b>Describe Existing Easement</b>	Severed Lands	Retained Lands	
5. <b>Dimensions of Lands in Metric Units</b> (MUST accurately match dimension noted on submitted sketch)			
	Severed/Servient Lands – Part #:	Retained Lands – Part #:	
Frontage			
Total Area (m² or ha)			

Office Use Only				
Official Plan Designation:		Zoning:	Zoning:	
		,		
6. Use of Land (check wh			1	
	Severed			d Lands
	Existing	Proposed	Existing	Proposed
Urban				
Residential				
Seasonal Residential				
Commercial				
Industrial				
Agricultural				
Rural				
Rural Residential				
Hamlet				
Mobile Home Park				
Other (Please specify)				
List the number and type of existing and proposed buildings and structures on the lands				
Type of Service	Municipal	Private	Municipal	Private

Water

Sanitary

7. Agricultural Information
Agricultural Code of Practise – Minimum Distance Separation (MDS)
Is the purpose of the severance to dispose of a surplus farm dwelling?  Yes  No  If Yes, a Minimum Distance Separation is not required. If No, proceed.
Is there a livestock barn or manure storage facility located within 750 metres of the severed land?  Yes No  If Yes, please complete an MDS calculation for each existing livestock facility within 750m of the subject land and submit it with the application. This can be completed by a hired agent that specializes in MDS requirements or by using the online AgriSuite software:  https://www.ontario.ca/page/minimum-distance-separation-mds-formulae  If Yes, provide addresses/locations of the existing facilities:
8. Has there ever been an application for consent by the current or previous owners on this parcel of land?  O Yes O No  If Yes,  File No.:
For what use?:
Date of transfer, name of transferee and land use:
9. Has the parcel to be severed or retained ever submitted an application for a plan of subdivision?  O Yes O No  If Yes, specify date and File No.:
Status of File:
10. Has the severed or retained land ever been the subject of a variance, zoning amendment, Minister's zoning order amendment or official plan amendment application?  Yes No
If Yes, specify date and File No.:
Type of application:
Status of File:

Otalf on Ament Has
Staff or Agent Use 11. Township Official Plan Designation
Severed Land:
Severeu Land.
Retained Land:
Northumberland County Official Plan Designation
Severed Land:
Retained Land:
12. Zoning
Severed Land:
Retained Land:
13. Is the application consistent with the Provincial Policy Statement?  Yes No
14. Is the subject land within an area of land designated under the Oak Ridges Moraine
Conservation Plan?
O Yes O No
0 100 0 100
If Yes, please specify whether the application conforms to or does not conflict with the Oak Ridges
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If Yes, please specify whether the application conforms to or does not conflict with the Oak Ridges
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16. Property Frontage:	Severed Land	Retained Land
a) Municipal Road	П	
B) County Road		
c) Unopened Road Allowance		
d) Right-of-Way		
e) Other:		
State name(s) of Road(s)		
17. Is access by water? If Yes, additional information may be required.		
O Yes O No		
18. Required Sketch		
The applicant shall attach to th	is application a professional sl	ketch completed by an Ontario
Land Surveyor showing the fol	lowing:	
Lot boundaries should be of	proportionate depth, width and b	e of regular shape.
The boundaries and dimensions of the subject land, the part that is intended to be severed		
and the part that is intended to be retained.		
The boundaries and dimensions of any land abutting the subject land that is owned by the		
owner of the subject land.		
The approximate distance between the subject land, and the nearest township lot line or		
landmark, such as a bridge or railway crossing.		
The approximate location of all natural and artificial features (for example, buildings, railways,		
roads, watercourses, drainage ditches, banks or rivers or streams, wetlands, wooded areas, wells		
and septic tanks) that are located on the subject land and on land that is adjacent to it and in the		
applicant's opinion, may affect the application.		
The use of adjacent lands (i.	e. residential, agricultural, comm	ercial, etc.)
The location, width, and name of any roads within or abutting the subject land indicating		
whether it is an unopened road allowance, a public travelled road, a private road, or a right-of-way.		
If access to the subject land will be by water only, the location of the parking and boat docking		
facility used.		
The location and nature of a	ny easement affecting the subjec	t land.
The boundaries and dimens	ions of leases, mortgages, etc., e	existing and being applied for on
the subject land and the boundar		3
mortgages, etc., existing or being	•	

Please Note: All dimensions on the submitted sketch are final once Committee grants conditional approval.

#### **Finalization of Consent:**

Once all of the conditions contained in the Committee's Decision are fully satisfied, the applicant's solicitor must prepare and forward the legal document(s) with any additional applicable fees to the Township of Cramahe Planning Department.

For most applications (lot line adjustments and/or new lots) the legal documents, as prepared by a solicitor, shall include the following documents in triplicate:

- 1. Draft of the complete Transfer/Deed of Land.
- 2. Acknowledgment and Direction document signed by all owners; and
- 3. Schedule "A" Certificate for stamping (the full legal description of the "severed" lands)

The legal document(s) is/are to contain a registrable description satisfactory to the Registrar in keeping with the current requirements of the Registry Act.

The document(s) will be returned to the solicitor for registration purposes.

## This application must be submitted to:

The Township of Cramahe c/o Planning Department 1 Toronto Street, Colborne, ON K0K 1S0

Phone: 905-355-2821 ext: 227 or 242

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9. Affidavit or Sworn Declaration		
Note: All applicants shall ensure tha Planning Act has been made before sign until you are witnessed by a Co	completing this declaration. Please do not	
This section is to be completed by the cauthorized agent, please fill out the Aut	owner or authorized agent – if done by the horization Section as well.	
all exhibits transmitted, herewith, are tru	all statements contained in this application and ue and I make this solemn declaration and knowing that it is of the same force and	
legal and registration fees related to thi	cost of all consulting planning, engineering, s application as deemed necessary by the such costs, and for which the municipality will	
Sworn (or declared) before me at the Township of Cramahe in the County of Northumberland this		
day of	,·	
Commissioner of Oaths	Applicant	
	Applicant	
	Applicant	
	A 11	
	Applicant	

# Attachment #1 Authorization of Agent



This must be completed if an agent is to be authorized to submit the application and to represent the owner. **This form must be signed by the owner**.

Authorization of Owner for Age	t to make the application.
Address of Subject Property:	
Name of Registered Owner(s):	
Application for Consent (list tran	saction type):
and I have examined the conte	I, I am the registered owner of the lands described in this application, ats of this application and hereby certify that the information submitted sofar as I have knowledge of these facts, and I authorize the my behalf.
Name of Authorized Agent(s)	
Date	 Signature of Owner

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