



# The Corporation of the Township of Georgian Bay

## APPLICATION FOR PRE-CONSULTATION

99 Lone Pine Road  
Port Severn, ON L0K 1S0

Phone (705) 538-2337  
E-mail • [planning@gbtownship.ca](mailto:planning@gbtownship.ca)  
Web • [www.gbtownship.ca](http://www.gbtownship.ca)

OFFICE USE ONLY			
<b>Date Received:</b>		<b>Application No:</b>	
<b>Received By:</b>		<b>Fees Paid:</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Date Accepted:</b>		<b>Complete Application:</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>

The undersigned agrees and encloses herewith an Application Fee in the amount of:

\$282.50 (HST Included)      Pre-Consultation

and agrees to be responsible for any additional professional review or legal costs/fees as deemed necessary by the Township;

and agrees to be responsible for all legal costs associated with the application and understands that if the associated fees related to the above noted professional and legal costs are not paid in full, that the application will not proceed;

and understands is non-refundable and that no assurance is given that the payment of the fee will result in approval of the application.

X

\_\_\_\_\_  
Applicant/Authorized Agent

Date: \_\_\_\_\_

**COMPLETENESS OF THE APPLICATION:** *This application form sets out the information that must be provided by the applicant, as prescribed in the various Ontario Regulations made under the Planning Act. It also sets out other information that will assist the Township and others in their planning evaluation of the proposal. To ensure the quickest and most complete review, this information should be submitted at the time of application. In the absence of this information, it may not be possible to do a complete review within the legislated time frame for making a decision. If the requested information, including the plans and fee, is not provided, the Township will return the application or refuse to further consider the application until the information, plans and fee have been provided.*

**Please ensure to complete this application in its entirety and submit any additional information that may have been identified as required through the pre-consultation process.**

<b>1. Applicant:</b>	
Name	
Mailing Address	
Telephone No.	
Email Address	
<b>2. Agent (if applicable):</b> <i>Note all correspondence, notices, etc. initiated by Council or Committee with respect to this application, will be directed to the applicant's agent noted above, except where no agent is employed, then it will be directed to the owner/applicant.</i>	
Name	
Mailing Address	
Telephone No.	
Email Address	
<b>3. Subject Lands:</b>	
Municipality	
Legal Description	
Civic Address	
Roll Number	
Is there currently a BLUE 911 number sign location on the property? Yes <input type="checkbox"/> No <input type="checkbox"/>	
<i>If no, you are required to purchase a sign and post it on your property prior to the processing of this application. You can purchase a sign at the Township office for \$40.00.</i>	
Date acquired by current owner	
Date existing buildings were constructed	

**Are there any easements or restrictive covenants affecting the subject lands?**

Yes  No

**If yes,** please describe the easement or covenant and its effect:

**Lot Dimensions**

Frontage (m)

Depth (m)

Area (ha)

**Access**

- Provincial Highway
- Municipal Road (All Season)
- Municipal Road (Seasonal)
- Right-of-Way
- Water Access Only

*If access to the subject land is by water only, please identify the parking and docking facilities used or to be used and the approximate distance of these facilities from the subject land and the nearest public road.*

**Water Service**

- Municipal Service
- Privately Owned & Operated Individual or Communal Well
- Lake or Other Waterbody

**Sewage Service**

- Municipal Service
- Privately Owned & Operated Individual or Communal Septic System
- Privy or Other Means

<b>Storm Drainage</b>
Sewers <input type="checkbox"/> Ditches/Swales <input type="checkbox"/> Other Means <input type="checkbox"/>
<b>4. Planning Information:</b>
<p><b>Have the lands ever been the subject of an application under the <i>Act</i> for approval of a Plan of Subdivision or Consent?</b>          Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide the following:</p> <p><b>File No.:</b></p> <p><b>Status:</b></p>
<p><b>Have the lands ever been the subject of an amendment to a Zoning By-law?</b>          Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide the following:</p> <p><b>File No.:</b></p> <p><b>Status:</b></p>
<p><b>Have the lands ever been the subject of an application for approval of Site Plan Control?</b>          Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide the following:</p> <p><b>File No.:</b></p> <p><b>Status:</b></p>
<p><b>Have the lands ever been the subject of an application for approval of Minor Variance?</b>          Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide the following:</p> <p><b>File No.:</b></p> <p><b>Status:</b></p>
<p><b>Have the subject lands ever been the subject of a Minister's Zoning Order?</b>          Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please provide the following:</p> <p>Ontario Regulation No.:</p>
<p><b>South Georgian Bay Lake Simcoe Source Protection Plan</b></p> <p>Is the subject land within a Wellhead Protection Area (WHPA), and Issue Contributing Area (ICA) or an Intake Protection Zone (IPZ)?</p>

Yes  No

If yes, identify the WHPA/ICA/IPZ:

If yes, do you have an approved Risk Management Plan (RMP) and/or a Section Fifty-Nine (59) Notice to Proceed from the Risk Management Official (RMO)? (Please attach)

Yes  No

## **5. Use of the Land:**

**What are the existing uses of the subject lands?**

**What are the proposed uses of the subject lands?**

**Has the grading of the subject land been changed by adding earth or material? Has filling occurred on the subject land?**

Yes  No  Unknown

**Has a gasoline station and/or automobile station been located on the subject land or adjacent lands at any time?**

Yes  No  Unknown

**Has there been petroleum or other fuel stored on the subject land or adjacent lands?**

Yes  No  Unknown

**Are there or have there ever been underground storage tanks or buried waste on the subject land or adjacent lands?**

Yes  No  Unknown

**Have the lands or adjacent lands ever been used as a weapons firing range?**

Yes  No  Unknown

**Have the lands or adjacent lands ever been used as an agricultural operation where cyanide products may have been applied as pesticides and/or sewage applied to the lands?**

Yes  No  Unknown

**Is the nearest boundary line of the application within 500 metres (1, 640 feet) of the boundary line of an operational/non-operational public or private waste disposal site, landfill or dump?**

Yes  No  Unknown

**If there are existing or previously existing buildings on the subject lands, are there any building materials remaining on site which are potentially hazardous to public health?**

Yes  No  Unknown

**Is there a reason to believe the subject lands may have been contaminated by an existing or former uses on the site or adjacent site?**

Yes  No  Unknown

**Current zoning of the subject lands**

**Surrounding Land Uses**

**What *Planning Act* application will you apply for? Check all that apply.**

**Official Plan Amendment (OPA)**

**Zoning By-law Amendment (ZBA)**

**Plan of Subdivision (SDN)**

**Plan of Condominium (CDM)**

**Condominium Conversion**

**Part Lot Control (PLC)**

**Site Plan Control (SPC)**

**Minor Variance (MV)**

**Please provide a detailed summary of the proposal:**

*For an OPA, describe the amendment being sought. Indicate what land use designation or Special Policy Area you are requesting or amending. For a ZBA, describe the amendment being sought. Indicate what zoning provision you are requesting or amending.*

**Site Plan Drawing Requirements:**

The Site Plan should be ruler drawn, (not freehand) to scale and based on an up-to-date Plan of Survey prepared by an Ontario Land Surveyor (OLS) unless otherwise determined by Township Staff.

The following items are required:

- Title, location and name of owner
- A north arrow
- An accurate plan of the entire property drawn to scale
- Dimensions of the entire property
- Location and size of existing buildings and structures, docks and distances from any buildings or structures, streets and property boundaries
- Location and size of proposed buildings, structures including docks and distances from adjacent buildings and structures, streets and property boundaries
- Location and dimensions of septic tile field and well and distance from the road and lake
- Location of existing, to be removed and to be added vegetation including trees and shrubs
- Any other details deemed necessary by the Township.

The following items are required where applicable:

- Location and dimensions of access driveways
- Parking and loading spaces and their dimensions
- Type of ground treatment for parking areas and entranceways
- Width of traffic flow areas
- Location of existing right-of-ways or easements
- Locations of watercourses and extent of flood plain (if flood elevation is known)
- Proposed drainage patterns

- Locations of prominent existing trees, shrubs, rock outcrops, or groupings thereof
- Location, extent and type of proposed landscaping
- Existing and proposed elevation where there will be a significant alteration to the existing grade
- Garbage storage, location and type
- Any other details deemed necessary by the Township.

If you have any questions about this application, please contact the Planning Department for assistance at 1(800) 567-0187.

### NOTICE OF COLLECTION

*Personal information on this form is collected under the authority of the Planning Act. All names addresses and comments included is material available to the public in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act.*

*Questions regarding this collection and its release under the Act should be directed to the Township Clerk, 99 Lone Pine Road, Port Severn, Ontario L0K 1S0, telephone: 705-538-2337 extension 227 during business hours or via email to [kway@gbtownship.ca](mailto:kway@gbtownship.ca).*

### AGENT AUTHORIZATION

I / We \_\_\_\_\_ am / are the registered owner(s) of the land that is the subject of this application for consent and for the purposes of the Freedom of Information and Protection of Privacy Act, I / we authorize \_\_\_\_\_ to make this application on my / our behalf.

This authorization also allows the applicant to appear at any hearing(s) of the application and provide any information or material required by the Committee of Adjustment relevant to the application on my / our behalf.

Date: \_\_\_\_\_

X

Registered Owner(s)



## PERMISSION TO ENTER PROPERTY

I / We \_\_\_\_\_ hereby authorize the members of Council, members of the Committee of Adjustment, members of the staff of the Township of Georgian Bay and designated consultants to enter onto the above-noted property for the limited purposes of evaluating the merits of this application over the time this application is under consideration by the Township.

Date: \_\_\_\_\_

X

\_\_\_\_\_  
Registered Owner(s)