

The Corporation of the Township of Chapple
(the "Municipality")
P.O. Box 4, 54 Barwick Road
Barwick, ON POW 1A0
T: 807-487-2354 F: 807-487-2406

**APPLICATION FOR
SITE PLAN CONTROL**
(the "Application")

www.chapple.on.ca

Office use only

Date Application received by Municipality:

Application fee submitted:

Receipt Number:

File Number:

APPLICATION FOR SITE PLAN CONTROL

Personal information on this form is collected pursuant to the *Planning Act*. Please direct any questions regarding the collection of this information to the Clerk of the Municipality.

In accordance with Section 1.0.1 of the *Planning Act*, information and material required to be provided to the Municipality or other approval authority as part of this Application shall be made available to the public.

This Application and all other information and material, together with the prescribed fee, is required to be submitted to the Municipality.

SUBMISSION REQUIREMENTS

Study and plan requirements are outlined for the Applicant during the pre-application consultation. You are strongly encouraged to contact the Clerk of the Municipality to discuss study and plan submission requirements. If you fail to consult with the Municipality, the Municipality cannot confirm the completeness of your Application, which may result in delays.

Please note:

- All plans and drawings must be produced on a page not exceeding 11"x17".
- All dimensions should be in metric.
- Generally, all plans, drawings, and studies required with this Application must be dated, signed, and sealed by a qualified engineer, architect, surveyor, planner or other designated specialist. The Municipality may not review a plan or study if this information is missing.
- Electronic copies of all required studies must be supplied on a CD in PDF format. Please ensure that the CD(s) accompany your Application.
- Additional development applications, such as plan of subdivision may be required in support of the Application.

SUBMISSION REQUIREMENTS (unless otherwise determined by the Municipality):

5 copies of the following plans. Landscaping and site servicing may be combined on one plan.

- Site Plan
- Landscape Plan
- Grading and Drainage Plan
- Site Servicing Plan
- Survey Plan

POTENTIAL STUDIES AND PLANS (may be required at submission or prior to final approval):

- Planning Rationale
- Heritage Impact Assessment
- Environmental Impact Statement
- Archaeological Assessment
- Transportation Impact Study
- Minimum Distance Separation (MDS) Criteria Evaluation
- Servicing Options Study
- Drainage/Stormwater Management Report/Plan
- Geotechnical Study
- Hydrogeological Study
- Confirmation of Hauled Sewage/Septage Capacity Report
- Erosion and Sediment Control Plan
- Feasibility/Detailed Noise Study
- Vibration Study
- Sun-Shadow Study
- Fisheries Assessment
- Shoreline Riparian Control Study
- Phase I Environmental Site Assessment/Phase II Environmental Site Assessment/Record of Site Condition (RSC)
- Other studies to address potential land use compatibility issues
- Other information as required (eg, copies of any easements or covenants, Ministry of Transportation permit for entrances from Provincial Highways, Northwestern Health Unit approvals)
- Other plans and drawings as required

SECTION 1: BACKGROUND INFORMATION

1. Type of Application:

- New Application
- Revision to existing site plan control

2. Description of the subject land:

Municipal Address:		
Legal Description:		
Lot Frontage (m):	Lot Depth (m):	Lot area (m ²):

3. The undersigned registered owner(s) (individually and, if more than one, collectively referred to in this Application as the "Applicant") of the subject land hereby apply(ies) for site plan control as described in this Application:

Registered Owner (s)		Cell Phone	
Mailing Address		Home	
Postal Code		Business	
Email		Fax	

4. If the Applicant is or will be represented by someone other than the Applicant, and/or the Application is or has been prepared and submitted by someone other than the Applicant, please specify:

Agent or Solicitor		Cell Phone	
Mailing Address		Home	
Postal Code		Business	
Email		Fax	

5. Pre-consultation:

Please specify the date the Clerk was contacted to determine the need for a pre-consultation meeting prior to submitting the Application:

Was a pre-consultation meeting determined to be required? Yes No

If yes, what was the date of the pre-consultation meeting?

6. Are there any easements or restrictive covenants affecting the subject land? Yes No

If there are easements or restrictive covenants on the subject land, please provide a copy with the Application.

7. Are any easements required? Yes No

If yes, please describe them:

8. Identify the holders of any mortgages, charges or other encumbrances in respect of the subject land:

Name(s): _____

Address(es): _____

SECTION 2: PROPOSAL DETAILS

9. Describe the existing uses on the subject land:

- a. Date that existing uses were established on the subject land: _____
- b. Number of existing buildings or structures on the subject land: _____
- c. Date of construction of existing buildings or structures on the subject land: _____

10. Current Official Plan land use designation: _____

11. Current zoning of the subject land: _____. By-law: _____

12. Particulars of all buildings. Please indicate all dimensions in metric.

	Existing	Proposed
Type of Building		
Ground Floor Area (m ²)		
Gross Floor Area (m ²)		
No. of Storeys		
Width (m)		
Length (m)		
Height (m)		
Date of construction		

- a. Are any of the existing buildings proposed to be demolished or removed? Yes No

If yes, please identify which buildings are to be demolished or removed:

13. Location of all buildings and structures on or proposed for the subject land (specify distances from side, rear and front lot lines in metric).

	Existing	Proposed
Front (m)		
Rear (m)		
Interior Side (m)		
Exterior Side (m)		
Corner Side, if applicable (m)		

14. How is the subject land accessed?

- Provincial Highway
- Township Road
- Private Road
- Water Access

If access to the subject land will be by water only, indicate parking and docking facilities to be used and the approximate distance of these facilities from the subject land and the nearest public road. Please provide these details on the required sketch.

If access to the subject land is from a Provincial Highway, please contact the Ministry of Transportation of Ontario to determine the status of an entrance permit. **Please provide a copy of the documentation permitting the entrance with this Application.**

15. Please describe the water supply, sewage disposal, and storm drainage arrangements for the existing and proposed development.

		Existing	Proposed
Water Supply	Municipally owned and operated piped water system	<input type="checkbox"/>	<input type="checkbox"/>
	Private water supply (individual or communal well)	<input type="checkbox"/>	<input type="checkbox"/>
	Lake	<input type="checkbox"/>	<input type="checkbox"/>
	Other (please describe)		
Sewage Disposal	Municipally owned and operated sanitary sewage system	<input type="checkbox"/>	<input type="checkbox"/>
	Private septic system * (individual septic tank or tile field system)	<input type="checkbox"/>	<input type="checkbox"/>
	Communal septic system	<input type="checkbox"/>	<input type="checkbox"/>
	Other (please describe)		
Storm Drainage	Storm sewers	<input type="checkbox"/>	<input type="checkbox"/>
	Ditches	<input type="checkbox"/>	<input type="checkbox"/>
	Private services	<input type="checkbox"/>	<input type="checkbox"/>
	Other (please describe)		

**All new individual private sewage disposal systems require the approval of the Northwestern Health Unit.*

16. If there are other servicing requirements (eg, hydro) required for the development, please describe them:

The Applicant will be required to contact the appropriate service provider for service requirements.

17. If there is any additional information which may be relevant to your proposal which should be considered by any of the agencies reviewing this Application, please describe below:

A large, empty rectangular box with a thin black border, intended for the applicant to provide additional information relevant to their proposal. The box is currently blank.

SECTION 3: ACKNOWLEDGEMENT AND CONSENT

Complete if the Applicant is the Owner: OWNER’S CONSENT

I/we, _____ (please print all names), am/are the owner(s) of the land that is the subject of this Application, and for the purposes of the Freedom of Information and Protection of 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 all purposes of this Application. I/we grant the Municipality permission to attend, photograph and conduct inspections of the land that is the subject of this Application as part of the Municipality’s review and processing of this Application.

Date

Signature of Owner

Date

Signature of Owner

Complete if the Applicant is not the Owner: APPOINTMENT OF AUTHORIZED AGENT

Authorization of Owner

I/we, _____ (please print all names), am/are the owner(s) of the land that is the subject of this Application, and for the purposes of processing, the Freedom of Information and Protection of Privacy Act, and otherwise, I/we authorize

- the agent or solicitor identified in paragraph 3 of this Application; or
- _____
(name and contact information)

to act as my/our agent for this Application, and provide any of my/our personal information that may or will be included in this Application or collected during the processing of the Application, and I/we 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 all purposes of this Application.

Date

Signature of Owner

Date

Signature of Owner

SECTION 5: DECLARATION**DECLARATION****of Applicant or Authorized Agent**

I/we, _____, of the Municipality of _____,
in the _____, solemnly declare that:

All the statements contained in this Application are true and I/we make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

Jointly and Severally
DECLARED before me

at _____, Ontario,

this _____ day of _____ 20____.

Signature of Commissioner, etc.

Signature of Applicant or Authorized Agent

Please note:

- **The Owner must complete the Owner's Consent.**
- **If the Applicant is not the Owner, the Application must be accompanied by an Authorization of Owner.**
- **Three (3) copies of this Application are required for processing accompanied by the prescribed fee.**
- **Application and prescribed fee to be filed with the Clerk.**
- **It is strongly recommended that you consult with the Clerk to ensure the timeline of your Application coincides with your development proposal.**