



**Application for Consent**  
**Township of Wainfleet**  
**The Planning Act – Section 53**

**FOR OFFICE USE**

File No. \_\_\_\_\_

Roll No. \_\_\_\_\_

Date Completed: \_\_\_\_\_  
(MM/DD/YYYY)

(Note: Prior to completing this form, the applicant should read the attached submission requirements)

**PLEASE TYPE OR WRITE CLEARLY USING BLUE OR BLACK INK**

1. (a) Registered Owner(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

(b) Registered Owner(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

(c) Registered Owner(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

(d) Please specify to whom all communications should be sent:  
Owner  Solicitor  Agent

2. (a) Type and purpose of proposed transaction: (check appropriate space(s)):  
 Creation of a New lot                       Disposal of Surplus Farm Dwelling  
 Addition to Lot                                 Mortgage or Charge  
 Partial Discharge of Mortgage    Lease  
 Easement (indicate purpose): \_\_\_\_\_

(b) If a lot addition, identify the lands to which the parcel will be added: \_\_\_\_\_  
\_\_\_\_\_

(c) Name of person(s), if known, to which land or interest in land is intended to be conveyed, leased or mortgaged: \_\_\_\_\_

3. Are there any existing easements or restrictive covenants affecting the land?      Yes       No

If yes, please explain: \_\_\_\_\_

4. **Location** of land:

Municipality (City/Town/Township) \_\_\_\_\_

Former Municipality \_\_\_\_\_

Concession No. \_\_\_\_\_ Lot(s) \_\_\_\_\_ Registered Plan No. \_\_\_\_\_ Lot(s) \_\_\_\_\_

Reference Plan No. \_\_\_\_\_ Part(s) \_\_\_\_\_

Name of Street \_\_\_\_\_ Street Number \_\_\_\_\_

5. Description of land to be **severed**: Part No. on Sketch \_\_\_\_\_

(a) Frontage \_\_\_\_\_ Feet Depth \_\_\_\_\_ Feet Area \_\_\_\_\_ Acres

(b) Existing Use \_\_\_\_\_ Proposed Use \_\_\_\_\_

(c) Existing and proposed buildings and structures on the subject land:

Existing: \_\_\_\_\_

Proposed: \_\_\_\_\_

6. Description of land to be **retained**:

(a) Frontage \_\_\_\_\_ Feet Depth \_\_\_\_\_ Feet Area \_\_\_\_\_ Acres

(b) Existing Use \_\_\_\_\_ Proposed Use \_\_\_\_\_

(c) Existing and proposed buildings and structures on the subject land:

Existing: \_\_\_\_\_

Proposed: \_\_\_\_\_

(a) Type of access to subject parcel:

- |   |  |
|---|--|
| <input type="checkbox"/> Provincial Highway                     | <input type="checkbox"/> Regional Road     |
| <input type="checkbox"/> Municipal Road (Maintained all year)   | <input type="checkbox"/> Other Public Road |
| <input type="checkbox"/> Municipal Road (Maintained seasonally) | <input type="checkbox"/> Right-of-Way      |
| <input type="checkbox"/> Water Access                           | <input type="checkbox"/> Private Road      |

(b) Types of access to retained land:

- |   |  |
|---|--|
| <input type="checkbox"/> Provincial Highway                     | <input type="checkbox"/> Regional Road     |
| <input type="checkbox"/> Municipal Road (Maintained all year)   | <input type="checkbox"/> Other Public Road |
| <input type="checkbox"/> Municipal Road (Maintained seasonally) | <input type="checkbox"/> Right-of-Way      |
| <input type="checkbox"/> Water Access                           | <input type="checkbox"/> Private Road      |

7. What type of water supply is proposed? (Check appropriate space)

TYPE	PROPOSED LOT	RETAINED LOT
Publicly owned and operated sanitary sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Septic system (private or communal)	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>

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8. What type of sewage disposal is proposed? (check appropriate space)

TYPE	PROPOSED LOT	RETAINED LOT
Publicly owned and operated sanitary sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Septic system (private or communal)	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>

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9. **Official Plan Information**

- (a) Township Municipal Official Plan Designation: \_\_\_\_\_
- (b) Regional Official Plan Designation: \_\_\_\_\_
- (c) Zoning of the Subject Land: \_\_\_\_\_

10. Is the proposal consistent with policy statements issued under Subsection 3(1) of the Planning Act, 1990, R.S.O., as amended? Yes  No

11. Is the subject land within an area of land designated under any provincial plan(s)? Yes  No

If yes, please explain: \_\_\_\_\_

Does the application conform (i.e. does not conflict) with the applicable provincial plan(s)? Yes  No

12. (a) Has the subject land ever been the subject of an application for approval of a plan of subdivision under Section 51 of the Planning Act or a consent under Section 53 of the Act? Yes  No

(b) If the answer to (a) is "Yes", please provide the following information:

File Number: \_\_\_\_\_ Decision: \_\_\_\_\_

13. (a) Has any land been severed from the parcel originally acquired by the owner of the subject land?

Yes  No

(b) If the answer to (a) is "Yes", please indicate previous severances on the required sketch and supply the following information for each lot severed:

Grantee's (Purchaser's) Name: \_\_\_\_\_

Land use on Severed Parcel: \_\_\_\_\_

Date Parcel Transferred: \_\_\_\_\_

Consent File Number (if known): \_\_\_\_\_

14. (a) Is the subject land the subject of any other application under the Planning Act (e.g. approval of a plan of Subdivision, a consent application, an official plan amendment, a zoning bylaw amendment, minor variance? Yes  No

(b) If the answer of (a) is "Yes", give the file number and status of the application:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. As provided for in Ontario Regulation 197/96, and as required by this Committee of Adjustment, an application must be accompanied by **FIVE** (5 paper) copies and 1 digital) of a preliminary drawing prepared, signed and dated by an Ontario Land Surveyor, showing the information set out below. In the case of multiple applications, one set of fifteen drawings plus one extra copy for each additional application will suffice.

- (a) the boundaries and dimensions of any land abutting the subject land that is owned by the owner of the subject land;
- (b) the distance between the subject land and the nearest township lot line or landmark such as a bridge or railway crossing;
- (c) the boundaries and dimensions of the subject land, the part that is to be severed and the part that is to be retained;
- (d) the location of all land previously severed from the parcel originally acquired by the current owner of the subject land;
- (e) the approximate location of all natural and artificial features on the subject land and on the land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application, such as buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells and septic tanks;
- (f) the existing uses on adjacent land, such as residential, agricultural and commercial uses;
- (g) the location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public traveled road, a private road or a right-of-way;
- (h) if access to the subject land is by water only, the location of the parking and boat docking facilities to be used;
- (i) the location and nature of any easement affecting the subject land.

16. One copy of this application form is to be filed for each subject parcel, together with the required copies of the preliminary drawing and the applicable application fee payable in cash, by money order or by cheque made payable to the Treasurer, Township of Wainfleet.

17. 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/We \_\_\_\_\_  
am/are the Owner(s) of the land that is the subject of this application for Consent and for the purposes of the Municipal Freedom of Information and 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 the purposes of processing this application.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

**INFORMATION PROVIDED IN THIS APPLICATION WILL BECOME PART OF A PUBLIC RECORD**

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

**AUTHORIZATION FOR AGENT**

I/We, \_\_\_\_\_  
the Owner(s) of the subject property located at \_\_\_\_\_  
hereby authorize \_\_\_\_\_  
*(Insert name of person authorized to sign/act on your behalf)*

to make application(s) on my/our behalf to the Committee of Adjustment for the Township of Wainfleet for consent to convey an interest in the land in accordance with Subsection 1 of Section 53 of The Planning Act, R.S.O., 1990.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

**Note: This form is only to be used for applications which are to be signed by someone other than the owner(s).  
If the applicant is a corporation, the corporate seal is to be affixed over the owner's signature(s).**

**DECLARATION OF OWNER(S) THAT INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT**

I/We \_\_\_\_\_  
of the City/Town/Township \_\_\_\_\_  
in the County/District/Regional Municipality of \_\_\_\_\_

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.

DECLARED before me at the \_\_\_\_\_  
Township of Wainfleet \_\_\_\_\_  
in the Regional Municipality of Niagara \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_  
A.D. \_\_\_\_\_

) TO BE SIGNED IN THE PRESENCE OF A  
) COMMISSIONER FOR TAKING AFFIDAVITS  
)  
)  
)  
)  
)  
)  
)  
)

\_\_\_\_\_  
(Signature of applicant(s), solicitor or authorized agent)

A Commissioner, etc. \_\_\_\_\_