Cancellation of Consent Application

Township of Wainfleet Committee of Adjustment 31940 Highway #3 Wainfleet, ON LOS 1V0 Tel: 905-899-3463 Fax: 905-899-2340



Section 53 of the Planning Act, R.S.O 1990, As Amended

For Office Use Only	
Date Received:	Received By:
Application Deemed Complete? Yes No	Date Deemed Complete:
Roll Number:	File No.:

Note: Please type or write clearly using blue or black ink.

SECTION 1 – CONTACT INFORMATION			
Owner Information			
Registered Owner(s): (please indicate names exactly as shown on the Transfer Deed of Land)			
Mailing Address (Street address, unit number, city and postal code)			
Phone Number	Fax Number		
Email Address			
Solicitor Information (if applicable)			
Owner's Solicitor:			
Mailing Address (Street address, unit number, city and postal code)			
Phone Number	Fax Number		
Email Address			
Authorized Agent Information (if applicable)			
Owner's Authorized Agent:			
Mailing Address (Street address, unit number, city and postal of	code)		
Phone Number	Fax Number		
Email Address			
Please specify to whom all communications should be			
Owner Solicitor Agent			
SECTION 2 – PURPOSE OF APPLICATION Reason for Requesting the Cancellation of Consent:			
If a lot addition, identify the lands to which the parcel will be added:			
Name and address of person(s), if known, to whom land or interest in land is intended to be conveyed, leased or mortgaged:			

SECTION 3 – LOCATIO	N OF SUBJECT LAND			
Legal Description (Street number & name of street, lot, concession, registered plan, etc.)				
Are there any easement	s or restrictive covenants affecting the lar	nd?		
Yes (explain belo	ow) 🔲 No			
Date of acquisition of su	bject land by current Owner:			
Zoning:	Township Official Plan Designation:	Regional Official Plan Designation:		

SECTION 4 – SKETCH

An application must be accompanied by five (5) paper copies and one (1) digital copy of a preliminary drawing prepared in metric units, signed and dated by an Ontario Land Surveyor showing the following information:

- The boundaries and dimensions of any land abutting the subject land that is owned by the owner of the subject land;
- The distance between the subject land and the nearest Township lot line or landmark, such as a bridge or railway crossing;
 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, in metric units;
- The location of all land previously severed from the parcel originally acquired by the current owner of the subject land;
- The location of all natural and artificial features (for example, buildings, railways, roads, watercourses, drainage ditches, banks of rivers or streams, wetlands, wooded areas, wells, fences, driveways and septic tanks that are located on the subject land and on the land that is adjacent to it and in the applicant's opinion, may affect the application;
- The current uses of land that is adjacent to the subject land (for example, residential, agricultural, commercial);
 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;
- If access to the subject land is by water only, the location of the parking and boat docking facilities to be used;
- The location and nature of any easement affecting the subject land.

SECTION 5 – SUBJECT LAND INFORMATION				
Part No. on Sketch:	Existing Land Us	Existing Land Use:		and Use:
Frontage (m):	Depth (m):	Depth (m):		ha):
Type of access to subject parcel:				
Provincial HighwayMunicipal Road maintained all yearWater AccessRegional RoadMunicipal Road maintained seasonallyRight-of-WayPrivate RoadOther Public RoadRight-of-Way				
Type of water supply proposed for	r subject parcel:			
Publicly owned and operated piped water Cistern Well (private or communal) Other:				
Type of sewage disposal propose	ed for subject parcel:			
Publicly owned and operated sanitary sewage system Other: Septic system (private or communal)				
Existing Structures	Proposed Structures			
Is the subject property subject to any other applications under the Planning Act (ie. minor variance, zoning amendment)? Yes No				
If yes, File Number & Application Status:				
Has the subject property ever been part of an application for approval of a plan of subdivision or a consent under the Planning Act?				
If yes, File Number & Decision:				
Has the owner been granted previous consent to sever the subject land? Yes No				
Purchaser:	Land Use:	File N	o.:	Date Transferred:

SECTION 6 – RETAINED LAND INFORMATION			
Part No. on Sketch:	Existing Land Use:	Proposed Land Use:	
Frontage (m):	Depth (m):	Area (m ² or ha):	
Type of access to retained parcel:			
Provincial Highway	Municipal Road maintained all year	Water Access	
Regional Road	Municipal Road maintained seasonally	/ Right-of-Way	
Private Road	Other Public Road		
Type of water supply proposed for retained parcel:			
Publicly owned and operated piped water Cistern			
Well (private or communal)		:	
Type of sewage disposal proposed for retained parcel:			
Publicly owned and operated sanitary sewage system Other:			
Septic system (private or communal)			
Existing Structures	Proposed Structur	res	

SECTION 7 - CONSENT TO THE USE AND DISCLOSURE OR PERSONAL INFORMATION

All submission materials on file, including cover letters, application forms and plans will be made available to the public for viewing at the Township office, as required under Section 1.0.1 of the Planning Act, R.S.O. 1990 C.P.13. Personal information on file with the Planning Department is collected under the authority of the Planning Act and will be used to process the application.

I/We	Act, I/We authorize and consent to information that is collected under	the use by or the disclosure to any
Signature of Owner	Date	
Signature of Owner	Date	

SECTION 8 – PERMISSION TO ENTER

I/We

am/are the owner(s) of the land that is the subject of this application for consent and I/We authorize the members of the Committee of Adjustment and Township staff to enter onto the property for the purposes of evaluating the merits of the application(s).

Signature of Owner

Date

Signature of Owner

Date

SECTION 9 – AUTHORIZATION FOR AGENT (If applicable)

If the applicant is not the owner of the land that is the subject of this application, the authorization set out below must be completed by the owner(s). All registered owners must complete the authorization form for it to be valid.

Please Note: if the owner is a Corporation, the application must be signed by an officer of the Corporation and the Corporation's seal (if any) should be affixed or the words "I have the authority to bind the Corporation" may be printed under the signing officer's name instead of affixing the Corporate seal.

I/We_

____ am/are the owner(s) of the land that is the

subject of this application for consent and I/We hereby authorize _______ as my/our agent for the purpose of submitting an application(s) to the Committee of Adjustment for consent to convey an interest in the lands in accordance with Subsection 1 of Section 53 of the Planning Act, R.S.O. 1990, as amended.

Signature of Owner

Date

Signature of Owner

Date

SECTION 10 – AFFIDAVIT OF OWNER(S) OR AUTHORIZED AGENT

The declaration below must be signed in the presence of a Commissioner for Taking Affidavits. This may be done when presenting your application at the Township office. Please make sure to bring your photo I.D. with a signature.

Please Note: if the owner is a Corporation, the application must be signed by an officer of the Corporation and the Corporation's seal (if any) should be affixed or the words "I have the authority to bind the Corporation" may be printed under the signing officer's name instead of affixing the Corporate seal.

I/We,

_____ of the City/Town/Township of _____

in the County/Region of ______ do solemnly declare that all 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 virtue of the Canada Evidence Act.

SWORN before me at the City/Town/Township of

_____in the

County/Region of _____

this _____ day of _____ 20 ____

A Commissioner etc.

Signature of Owner or Authorized Agent

Signature of Owner or Authorized Agent