Municipality of Trent Lakes 760 Peterborough County Road 36 Trent Lakes, Ontario KOM 1A0 Telephone: (705) 738-3800 Fax: (705) 738-3801 www.trentlakes.ca

Date	Deemed	Com	olete:

File Number:

Public Meeting Date:

Roll Number:__

Municipality of Trent Lakes

OFFICIAL PLAN AMENDMENT APPLICATION FORM

NOTE TO APPLICANTS: This application form must be used for amendments to the <u>Township Official Plan</u>. In this form, the term "subject land" means the land that is the subject of this application.

Completeness of the Application

The information in this form that **must** be provided by the applicant is indicated by the **black arrows** (\rightarrow) on the left side of the section numbers. This information is prescribed in the Schedule to Ontario Regulation 543/06 made under the **Planning Act**. The mandatory information must be provided with the appropriate fee. If the mandatory information, including the fee is not provided, the County will return the application or refuse to further consider the application until the prescribed information, and fee have been provided.

Prior to submitting this application to the Township, <u>applicants are requested to meet with County</u> <u>Planning Department staff to determine which supporting studies. as outlined in the County</u> <u>Official Plan. will be required</u> to be submitted with the application in order to deem the application 'complete'. If the appropriate studies are not submitted with the application, the application will be refused. The County is the approval authority for Township Official Plan Amendments.

Submission of the Application

The Municipality requires:

- 5 copies of the completed application form;
- 5 copies of the survey and/or sketch (measurements to be in metric units), on 8¹/₂" x 14" paper if the amendment is site specific and is amending the land use description on a property;
- 5 copies of additional information or reports, if required, and;
- The applicable fee as indicated on the Municipality's Fee Schedule
- Peer Review Reimbursement Agreement (if applicable) and associated fee/deposit

For Help

If you require help completing the application form, you can contact the Municipal Office during regular office hours.

Please complete the following:

\rightarrow 1. Name of Applicant:		
Address:		
Telephone:		
2. Name of Agent (if any):		
Address:		
Telephone:		
 Name of Registered Owner(s):_ Address:		
Telephone:		
→4. Description of Subject Lands:	Municipality:	
Lot:	Concession:	
Reference Plan:		
Street Name:	Street Number:	

 \rightarrow 5. Total area of land covered by the proposed amendment, if applicable and if known:

- →6. Indicate how water will be provided to the subject property (municipal piped water system, private individual or communal well, lake, or by other means).
- →7. Indicate how sewage disposal will be provided to the subject property (municipal sanitary sewage system, private individual or communal septic system, privy, or by other means).

IMPORTANT: If the requested amendment would permit development on privately owned and operated individual or communal septic system, and more than 4500 litres of effluent would be produced per day as a result of the development, please include a **servicing options report** and a **hydrogeological report**.

→8.	Do	es the amendment propose to (please indicate yes or no):	Yes /	No
	i)	Change, replace or delete a policy in the municipal Official Plan?		
	ii)	Add a policy to the municipal Official Plan?		
	iii)	Change or replace a land-identification category on Map A of		
		the municipal Official Plan?		

- \rightarrow 9. If the amendment request changes, replaces or deletes a policy, please identify the appropriate policy (by page and section number):
- \rightarrow 10. If the amendment request changes, replaces or deletes a policy **or** adds a policy, please indicate the <u>purpose</u> of the official plan amendment request (use additional sheets if necessary):
- \rightarrow 11. If a policy is being changed, replaced or deleted **or** if a policy is being added to the County Official Plan, indicate the <u>text</u> of the Official Plan Amendment request (use additional sheets if necessary):
- →12. What is the current designation of the subject lands in the Municipal Official Plan and the land uses authorized by this category (if applicable)?
- →13. If the amendment request changes or replaces a designation, please identify the designation to be changed or replaced **and** the <u>purpose</u> of such change:

14. Please provide the rationale/justification for the amendment request related to questions 8 to 13 on a separate sheet of paper.

 \rightarrow 15. What are the land uses which would be authorized by the official plan amendment request?

- \rightarrow 16. If the amendment request changes or replaces a schedule in the Municiapl Official Plan, please attach the <u>proposed schedule</u> to the back of this application.
- →17. If the amendment request changes all or any part of a settlement area boundary, or establishes a new settlement area in a municipality, please describe the current Official Plan policies dealing with the alteration or establishment of a settlement area (attach a separate sheet if necessary).
- \rightarrow 18. If the amendment request removes the subject land from an area of employment, please describe the current Official Plan policies dealing with the removal of land from an area of employment (attach a separate sheet if necessary).

 \rightarrow 19. Is the requested amendment consistent with the Provincial Policy Statement? Please explain.

→20. Is the subject property within an area of land designated under any provincial plan(s) as defined in Section 1 of the *Planning Act*? (e.g. Growth Plan, Oak Ridges Moraine Conservation Plan) If yes, please explain whether this amendment conforms or does not conflict with the provincial plan(s).

→21. Are the subject lands, **or** lands within 120 metres of the subject lands, the subject of any other application under the <u>Planning Act</u> (please indicate yes or no)?: Yes / No

i) application for approval of an official plan amendment:	
ii) zoning by-law amendment:	
iii) Minister's zoning order amendment:	
iv) minor variance:	
v) plan of subdivision or condominium:	
vi) consent:	

vii) site plan:

 \rightarrow 22. If yes to <u>any</u> of the above, and if known, please indicate:

- i) the file number(s) of the application(s):
- ii) the name of the approval authority considering the application:

iii) the lands affected by the application:	Municipality
Lot:	Concession:
Reference Plan:	Part Number:
Street Name:	Street Number:
iv) the purpose of the application:	

v) the status of the application:

vi) the effect of the application on the proposed amendment:

NOTE: IF MORE SPACE IS REQUIRED, PLEASE ATTACH THE REQUIRED INFORMATION TO THE BACK OF THIS APPLICATION

23. SWORN DECLARATION

I/We (applicant(s))

of the ____

(Municipality Name)

solemnly declare that:

all the above statements and the information contained in all the exhibits transmitted herewith, are true and 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 by virtue of the Canada Evidence Act and agree to allow the County of Peterborough, its employees and agents to enter upon the subject property for the purposes of conducting surveys and tests that may be necessary to process this application.

I/we also agree to pay any additional funds required by the County for the processing of this application in accordance with the County Fee Structure By-Law. Additional funds will not be required until the original application fee has been expended.

DECLARED before me at the of

this ______20 _____

Signature of Applicant

A Commissioner, etc.

Signature of Property Owner (if not the same as applicant)

Date

Please Note: Personal information contained on this form is collected under the authority of Section 29(2) of the £ Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56 as amended and will be used to assist in the correct processing of the application. If you have any questions about the collection, use or disclosure of this information by the County of Peterborough, please contact the CAO or Clerk, Municipality of Trent Lakes, 701 County Road 36 P.O. Box 820, Bobcaygeon, Ontario KOM 1A0 (705-738-3800).



701 County Road 36 P.O. Box 820 Bobcaygeon ON K0M 1A0 Tel: 705-738-3800

Tel: 705-738-3800 Fax: 705-738-3801

Planning Application Costs Acknowledgement Form

I, _____

do hereby acknowledge and agree that the payment of the fee that is submitted with the application for \$______, as being an application fee only, and will be used to defray the costs of processing this application, and;

do also hereby acknowledge and agree to assume all costs incurred by the Municipality of Trent Lakes associated with the processing of this application that exceed the amount of the application fee, including, but not restricted to, professional planning fees, engineering fees, and legal fees, in addition to the municipal costs associated with this application, and;

do also hereby acknowledge and agree to assume all costs incurred by the Municipality of Trent Lakes associated with any appeal to the Local Planning Appeal Tribunal with respect to this application.

Dated this ______ day of ______, _____.

Signature of Applicant or Authorized Agent