



Planning & Development Department
Form One
Planning Act Application

File Number: _____

Date Received: _____

Please Note that the **Planning Act** requires that a complete application be filed before it can be considered. You need to complete this form as well as the **Additional Requirements** for the specific application you are making. Please look at the Information For Applicants sheet for your type of application.

General Information

You are encouraged to discuss your application with the Planner for your municipality, and with the appropriate officials of the local municipality. You may also contact your local Planner by way of the County of Bruce website (www.brucecounty.on.ca) 'Living Here', 'Housing and Property' 'Land Use Planning', then **select your municipality**. At this point you will be provided with contact information for the planning hub and staff. Staff can provide you with information about your application. To avoid delay in processing, you should gather information about your property, and examine the provisions of Official Plans and Zoning By-Laws in force and effect.

Incomplete Applications May Be Refused

The Planning Act requires that complete applications be filed before the application(s) may be considered. The requirements for a complete application are defined in the Planning Act, its regulations, the Bruce County Official Plan and in Local Municipal Official Plans. Applications may be refused when incomplete.

A complete application consists of **Form 1** (Property and Applicant Information) completed and signed; a scalable and detailed site plan (site plan requirements are listed in the Application Information Package at the end of Form One), one (1) paper copy and one (1) electronic copy (Word or PDF) of all supplementary documents including reports, studies, maps and schedules as required, together with the associated development application fees (refer to the current fee schedule).

If You Are Unable to Answer Any of these Questions, Please Contact Your Local Planning and Development Office for Assistance.

For Office Use Only

Deemed to be a Complete Application on: _____

Signature of Bruce County Planner: _____

1. Type of Application: (Check All That Apply)

Committee of Adjustment - Choose One of the Options Below

Minor Variance

Alteration / Extension of Legal Non-Conforming Use

Zoning By-law Amendment

Consent (Severance) - Indicate the Type(s) of Consent Below

Easement

Lot Addition

New Lot

Other

County Official Plan Amendment

Local Official Plan Amendment

Subdivision / Condominium

Draft Approval - Plan of Subdivision or Plan of Condominium

Major Revision to Draft Approved Plan of Subdivision or Plan of Condominium

Minor Revision to Draft Approved Plan of Subdivision or Plan of Condominium

Extension of Draft Approval

Final Approval - Plan of Subdivision or Plan of Condominium

Condominium - Exemption from Draft Approval

(Please Complete and Attach the Appropriate Subdivision / Condominium Application Form)

Part Lot Control

Foreclosure

Power of Sale

Validation of Title

Other (Please Specify)

2. Purpose of the Application:

Please refer to the Application Information Package available online at <https://brucecounty.on.ca/living/land-use> for Purpose of Application examples. Use additional pages, if needed.

3. Registered Owner(s) Applicant Agent (please indicate ☒)

Name: _____

Mailing Address (including Unit/Box # and Postal Code): _____

Telephone (Work/Home/Cell): _____

E-Mail Address: _____

4. Registered Owner(s) Applicant Agent (please indicate ☒)

Name: (If different from Owner) _____

Mailing Address (including Unit/Box # and Postal Code): _____

Telephone (Work/Home/Cell): _____

E-Mail Address: _____

*All owners must be listed. If needed, please list additional owners with contact information on a separate page.

5. All communication(s) will be sent to the Prime Contact Only.

Please indicate who this will be:

Owner

Applicant

Agent

6. A Notice Sign is required to be posted.

Please indicate who the sign should be sent to:

Owner

Applicant

Agent

Other

7. Location of Property:

Street # or Civic Address _____

Legal Description (from tax bill) including Municipality and former Town/Village/Township:

Roll Number: _____

8. Entire Property (please provide metric units: metres / square metres / hectares)

Frontage: _____

Depth: _____

Area: _____

Existing Uses: _____

Existing Structures (number and description): _____

Proposed Uses: _____

Proposed Structures (number and description): _____

Existing Water Services:	Private	Municipal	Communal	None	Other
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Existing Sanitary Services:	Private	Municipal	Communal	None	Other
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Proposed Water Services:	Private	Municipal	Communal	None	Other
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Proposed Sanitary Services:	Private	Municipal	Communal	None	Other
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Access:	Provincial Highway	County Road	Year-Round Municipal Road
	Seasonal Municipal Road	Unopened Road Allowance	
	Private Right-of-Way	Other	

If proposed access is by water, what boat docking and parking facilities are available on the mainland? (Specify):

Note: For access to a Provincial Highway or County Road, access permits may be required. Please contact the Ministry of Transportation or the County of Bruce Transportation & Environmental Services Department for further information.

Electric Utility Provider (Hydro One, Westario Power, etc): _____

Natural Gas Provider: _____

Is the property abutting a cemetery? Yes No

Surrounding Land Uses:

**Complete Questions # 9 and # 10 ONLY if your application involves a consent.
Otherwise, skip and continue with Question # 11.**

(please provide metric units: metres / square metres / hectares)

9. Dimensions of Lands (Parcel to be Severed)

Frontage (along street) _____

Depth: _____

Area: _____

Existing Structures (number and description): _____

Proposed Structures (number and description): _____

Proposed Uses: _____

Proposed Water Services: Private Municipal Communal None Other

Proposed Sanitary Services: Private Municipal Communal None Other

Access: Provincial Highway County Road Year-Round Municipal Road
 Seasonal Municipal Road Unopened Road Allowance
 Private Right-of-Way Other

10. Dimensions of Lands (Parcel to be Retained)

Frontage (along street) _____

Depth: _____

Area: _____

Existing Structures (number and description): _____

Proposed Structures (number and description): _____

Proposed Uses: _____

Proposed Water Services: Private Municipal Communal None Other

Proposed Sanitary Services: Private Municipal Communal None Other

Access: Provincial Highway County Road Year-Round Municipal Road
 Seasonal Municipal Road Unopened Road Allowance
 Private Right-of-Way Other

11. Have the subject lands been the subject of a previous application for approval?
Yes No (If yes, please indicate file number, nature of the application, date of the application, and the decision).
12. Are there any easements or restrictive covenants applying to the subject lands?
Yes No (If yes, please attach copies of the covenants or easements, or a detailed description).
13. Have the subject lands been the subject of a Minister's Zoning Order?
Yes No
14. Is there a stream, pond, or other wetland within 100 metres of the subject lands?
Yes No
15. Are the subject lands within 100 metres of Lake Huron, Georgian Bay?
Yes No
16. Are the subject lands within 100 meters of an inland lake?
Yes No
17. Has the septic system been re-inspected?
Yes No
If yes, please provide date of re-inspection _____
18. Are stormwater sewers present?
Yes No Proposed
If no, indicate how the subject lands are drained _____
19. The date of construction of all buildings and structures on the subject lands:
20. Does the application require demolition of an existing building? Yes No
21. When did you acquire the subject property or properties? _____
22. Is the Application consistent with the Provincial Policy Statement? Yes No

(For more information on the Provincial Policy Statement, visit:
<https://www.ontario.ca/page/provincial-policy-statement-2020>)

Public Consultation

23. To meet the minimum requirements for Public Consultation under the *Planning Act*, the County Planning Department undertakes public consultation on your behalf for your proposed development. Do you propose to undertake any further public consultation (at your own expense) on behalf of your proposal?

No

Yes, I have or plan to speak with my neighbours to clarify any concerns they may have

Other plans: (public open houses, radio or newspaper advertisements, etc; please discuss these plans with the Department prior to initiating them)

Mortgage

24. Names and contact information of any financial institution that is a **holder of mortgages, charges or encumbrances** on the subject lands.

Name: _____

Contact Staff Name: _____

Address and Postal Code _____

Telephone: _____ Fax: _____

E-Mail Address: _____

For Farm Related Applications Only:

25. In order to shorten the time associated with processing Zoning/Consent applications for farmers wishing to dispose of surplus dwellings, the Planning Department requires your assistance in providing additional information. This information will assist the Planning Department in evaluating the application and in carrying out future site visits to the property. Additionally, the information will be used to assist in determining the compliance of the proposal with the Official Plan and relevant Minimum Distance Separation Formula.
- a) To what extent are you currently involved in active farming (e.g. farming full time, part time, renting out farm land to other farmers) _____
 - b) Farm Type: Incorporated Partnership Family Other
 - c) Total Land Holdings in Hectares: Own Rent
 - d) Location of home farm Municipality _____ Lot _____ Concession _____
 - e) Please complete the following table for each livestock facility on neighbouring lots within 460 metres of the new property boundaries proposed by the surplus lot.

Criteria	Barn 1	Barn 2	Barn 3
Distance from Barn or Manure Storage System to Nearest Point of Proposed New Zone or Consent			
Total Lot Size (hectares)			
Description of Animal Type (existing or potential) Beef, Dairy, Pigs Poultry (Chickens, Turkeys) etc. Eg. Beef Cows, including calves to weaning (all breeds) Swine, Weaners (7kg-27kg) Dairy Cattle, Large-framed e.g. Holsteins, Chickens, Broilers on an 8 week cycle			
Maximum Housing Capacity of Livestock Facility Eg. Total # of Chickens that can be housed in barn			
Type of Manure - Solid (dry) Liquid (wet)			
Type of Manure Storage System - Inside/Outside, Covered/Not Covered Eg. Liquid, outside with permanent, tight fitting or Solid, outside, no cover, 18-30% dry matter with covered liquid runoff storage			

Additional information regarding livestock facilities on neighbouring lots may be requested.

Questions # 26, 27, 28 and 29 must be completed in the presence of a "Commissioner of Oaths" by the property Owner(s), or the individual authorized below to make the application on behalf of the property Owner(s). Staff in each Planning Office are Authorized Commissioners. Please print names clearly.

26. I/We _____ hereby authorize a site visit(s) be undertaken by, but not limited to the staff of the following agencies: County of Bruce Planning Department, the Municipality, the Conservation Authority, and, the Grey-Bruce Health Unit, where applicable.

27. I/We _____ have reviewed the fees for applications, and the refund policy that forms part of this application form.

28. I/We _____ of the _____ in the County/ Regional Municipality Of _____, hereby solemnly declare that the statements made herein are to the best of my belief and knowledge, a true and complete representation of the purpose and intent of this application.

29. Date: _____ Signature Of Owner _____
Signature Of Owner _____
Signature Of Agent Or Applicant _____

Declared Before Me At The

_____ Of _____

In The _____ Of _____,

This _____ Day Of _____, 20____.

A Commissioner, Etc.

If you are an owner, and wish to have someone else represent you regarding this application, please complete the following:

Authorization of Owner(s) for Agent to Make the Application

I/We, _____, am/are the owner(s) of the land that is the subject of this application and I/we authorize _____ to make this application on my/our behalf.

Date

Signature of Owner