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Municipality of

/ County of Huron

Planning Application Form [Other]

1. Purpose of the Application

Please indicate appropriate APPLICATION TYPE [please check one]

Application Type	2024 Fees effective January 1, 2024		
Removal of Holding (H) Symbol	\$583 Fee payable to local municipality		
If combined with a planning application and when H is imposed by the Municipality	\$0		
Draft Approval Extension	\$2,081 Fee payable to Treasurer, County of Huron		
Phasing, Final Approval	\$1171 per final approval/phase		
Changes following Draft Approval Redline Changes to Plan to Conditions *Note: where final approval, phasing or changes to draft plan conditions result in the creation of additional lots/blocks/units, an additional fee of \$176.00 per lot/block/unit shall apply. (Developable lots/blocks only)	\$584 Fee payable to Treasurer, County of Huron		
By-law to Deem Lots not in a Plan of Subdivision, or the repeal of such By-law applicants cover all legal costs & by-law prep	\$467 Fee payable to local municipality		
By-law to Deem Lots where combined with any other planning application applicants cover all legal costs & by-law prep	\$233 Fee payable to local municipality		

Application Type	2024 Fees effective January 1, 2024	
Part Lot Control Exemption applicants cover all legal costs & by-law prep	\$2,341, plus \$176 per additional conveyable part over 2 Fee payable to local municipality	
Renewal of Temporary Use Zoning By-law	\$1,581 Fee payable to local municipality	
Natural Heritage Review by County Biologist (if development proposed within 120 m of a Natural Heritage feature)	\$228	
Comments on planning application Review of Terms of Reference and EIS	Variable Fee payable to Treasurer, County of Huron	
Agreements - site plan control, subdivision, condominium, development, lot grading & drainage. (Planning costs to be reimbursed like legal and engineering costs.) Cost recovery for legal, engineering & planning costs.	Variable Application fee determined by local municipality.	

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2. Applicant Information Name of Applicant: Home: Work: Cell: Email: Address: Province: Postal Code: Town: Name of Owner: Home: Work: Cell: Email: Address: Town: Province: Postal Code: 3. Location of the Subject Land (Complete applicable lines and provide a sketch or diagram) Ward: Municipality: Concession: Registered Plan: Property Roll #: Reference Plan: Lot Number(s): Lot(s) Block(s): Name of Street/Road: Part Numbers: Municipal Address Number (911): 4. Description of Land Frontage: Depth: Area: Existing Use(s) / Building(s) or Structure(s):

Proposed Us	se(s) / Buil	ding(s) or Structure(s):				
a) Type of A	.ccess: (cl	neck appropriate space)				
Provincial	l Highway	County Road			Municipal	Road
Maintaine	ed All Year	Seasonally Mai	ntained		Private Ro	pad
b) Type of w	ater supp	oly proposed: (check appro	priate sp	oace)		
publicly o	wned and	operated piped water system	1			
privately o	owned and	l operated communal well				
privately o	owned and	l operated individual well	dug	drilled		
c) Type of s	ewage dis	sposal proposed: (check ap	propriat	e space)		
publicly o	wned & op	perated sanitary sewage syst	em			
privy						
, ,		perated individual septic tanl	<			
•		perated communal				
septic sys	stem					
5. Other R	elated P	lanning Applications				
Has the subj	ect land e	ver been the subject of an ap	plication	under the I	Planning Act	t?
Yes	No	Unknown				
•	•	file number of the application n (i.e. changes to draft plan,	•	being requ	ested as we	ell as the decisior
File Number	:					
Decision:						

6. Other Required Information

Please list any supporting or attached documents, explanation letters: (e.g. deeming or part lot control exemption by-laws; a site plan; drawings, changes on plan outlined in red ink). Please specify what application is being requested and why (i.e. changes to draft plan, redline changes)

7. Natural Heritage

Has the Planner advised the applicant that this application needs to be reviewed by the Huron County Biologist for comments on Natural Heritage matters (fee payable to Treasurer, County of Huron).

Yes No Unknown

8. Draft Plan Approval Extension of Subdivision/Condominium

The responsibility for fulfilling the conditions of draft approval rests solely with the applicant. The County of Huron has no responsibility to ensure the applicant fulfills the conditions of draft plan approval or obtains final approval.

Only complete section 8 if making application to extend draft plan approval for a plan of subdivision/condominium

a) What conditions are outstanding on the plan of subdivision/condominium? Please list and refer to the conditions by name and number. For example: condition #5 – Development Agreement

b) What factors/reasons are preventing you from fulfilling the conditions of draft approval of the plan of subdivision/condominium (attached explanation letter, etc.)?

Attach letters indicating whether the following agencies support the extension of the draft plan of subdivision/condominium. See Appendix 1 for a form letter to have these agencies complete.

Municipality Con

Conservation Authorities (if applicable)

Office Use Only - Draft Plan Approval Ex	tension
Date of original approval:	
Approval authority when approved:	
Has draft approval been extended previously	y:
If YES, date extension approved:	
9a) Owner's Authorization (If the Own	ner is not filing the application)
(If Multiple Owners – an authorization letter fro	
If the PERSON filing the application as the Ap complete the following:	plicant is not the Owner, the registered Owner(s) mus
I/We	, being the registered owner(s) of the subject
lands, hereby authorize	to prepare and submit an application
for approval.	
Signature:	
9b) Applicant's Declaration & Conse	nt
•	ning Act, it is the policy of County of Huron Planning s to all development applications and supporting
This must be completed by the Person filing the	he Application for the proposed development site.
I	of the
(Name of Applicant)	(Name of Town, Township, etc.)
In the Region/County/District	solemnly declare that all of the
Statements contained in this application	

(Description)

And all supporting documents and plans are true and complete, and I 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".

In addition to the application fee, where the County/Municipality requires assistance from its solicitors or other technical or professional consultants in the processing of this application, the applicant shall be responsible for reimbursing all legal and consulting fees incurred by the County/Municipality, at the County/Municipality's actual cost. Depending on the amount of such fees, which the County/Municipality expects to incur on any given application, the County/Municipality may also require the applicant to enter into an agreement with respect to the payment of such fees and may, where appropriate, require security to be posted.

Declared before me at:				
Region/County/District: in the Municipality of:				
Statements contained in this application	on		_	
	(Decs	sription)		
I/We	ee to pay all fees incurre	ed by the		
County/Municipality related to the revi	ew of this application.			
Please <u>Print</u> Name of Applicant				
Commissioner of Oaths Signature:			_	
Please <u>Print</u> Name of Commissioner o	f Oaths			
9c) Applicant's Consent				
In submitting this development applica	tion and supporting do	ocumentation, I,		
the owner/the authorized applicant, he consent in accordance with the provisiof Privacy Act that the information on to by myself, my agents, consultants and available to the general public.	ons of the Municipal F his application and an	Freedom of Information and supporting documenta	and Protection ation provided	
I hereby authorize the staff of the Countries for purposes of evaluation of the		ccess the subject prope	rty without prior	
 Signature	(Day)	(Month)	(Year)	

Municipality & Agency Comment Form

Appendix 1: Draft Plan approval Extension for Plan of Subdivision/ Condominium

Note to applicant: It is the sole responsibility of applicant to obtain comments from the Municipality and the Conservation Authority, if applicable.

Section 1 – To be completed by the Applicant

Plan of Subdivision	Plan of Condominium		
File # 40T:	File # 40CDM:		
Owner			
Name:			
Home:	Work:		
Cell:			
Email:			
Address:			
Town:	Province:	Postal Code:	
Agent			
Name:			
Home:	Work:		
Cell:			
Email:			
Address:			
Town:	Province:	Postal Code:	

Section 2 – To be completed by the Municipality or Agency-supporting the extension. (* only to be completed for applications for extensions, if applicable)

		on behalf of the
	(Name)	(Organization)
	nd the County of Huron ium file number	extend draft plan approval for plan of subdivision/
□I		on behalf of the
	(Name)	(Organization)
		Huron extend draft plan approval for plan of subdivision/ for the following reasons:
Date	 Signature	 Municipality/Agent Name