



APPLICATION FOR OFFICIAL PLAN AMENDMENT

Corporation of The Town of Smiths Falls
77 Beckwith Street N, ON K7A 2B8, P.O. Box 695
Phone: 613.283.4124 Fax: 613.283.4764

Information Sheet

1. Completion of Application

All applicable information, including supporting studies, requested throughout any pre-consultation must be provided to conduct an initial review. The initial review of the application will determine if any other information is required.

Note: Prior to submitting this application, applicants are required to pre-consult with the Town's Planning Department to discuss application and project requirements.

2. Statutory Declaration

The application requires a Statutory Declaration which must be declared in the presence of a Commissioner for taking affidavits. The Declaration can be found on page 7.

3. Planning Rationale

The application must be accompanied by a written rationale which provides a complete explanation of the requested amendment within context of the Town's Official Plan and Provincial Policy Statement (2020).

4. Required fee

The cost of an Official Plan Amendment application is \$2500, payable to the Town of Smiths Falls by cash, debit or certified cheque. The fee is required upon submission of the application.

5. External Agencies

External agencies will be circulated on the application as part of the technical review process. This may result in additional incurred costs beyond the application fee. These agencies will invoice owners/applicants directly for services rendered.

The Rideau Valley Conservation Authority (RVCA) requires an initial fee of \$845, payable by certified cheque to the Rideau Valley Conservation Authority. The RVCA review fee, must be submitted with the application to the Town of Smiths Falls. Should the RVCA incur costs beyond the initial review fee which are associated with the application, the costs may be invoiced to the applicant.

6. Submission

The applicant must forward two (2) physical copies and an electronic version of the application and all supporting documentation to the Planning Department.

Corporation of The Town of Smiths Falls, 77 Beckwith Street N, ON K7A 2B8, P.O. Box 695
Phone: 613.283.4124, Fax: 613.283.474

www.smithsfalls.ca

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(Sect 22, Planning Act RSO 1990)

Office
Use

File #

Date Received:

Complete Date:

Fee Paid/Date:

The undersigned hereby applies to the Council of the Corporation of the Town of Smiths Falls for an amendment to the Town's Official Plan under section 22 of the *Planning Act* in respect of the lands hereinafter described, as outlined in this application and supporting documents. The undersigned hereby acknowledges that the filing of this application alone does not necessarily constitute fulfilling all the requirements of either the Town or the *Planning Act*.

1. Ownership Information

Registered Owner's Name(s):

Mailing Address:

Telephone - Main:

Alternate:

Email:

Date Property Acquired by the Current Owner (if known):

Copy of the deed must be submitted with the application.

2. Applicant Information

Applicant/Agent Name:

Note: If Applicant/Agent is different than Property Owner, the Owner's Authorization on page 7 is required. Where indicated, the Applicant/Agent will receive all communications relating to this application.

Mailing Address:

Telephone - Main:

Alternate:

Email:

Please Contact

Owner

Agent

Both

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3. Interest in the Subject Property

Please provide the names and addresses of any mortgages, charges or other encumbrance holders on property:

4. Description of Subject Lands

Geographic Twp: _____ Lot(s): _____ Concession(s): _____

Ref. Plan: _____ Lot/Block: _____ Ref. Plan: _____ Part(s): _____

Street Address: _____ Roll Number: 0904- _____

Frontage: _____ (m) Depth: _____ (m) Area: _____ (m²)

Type of Access: (check appropriate box)

- Provincial Highway/Connecting Link (Lombard and Cornelia St)
- Municipal Road (maintained year around)
- Right-of-way (private road)
- Municipal Road (seasonally maintained)
- Water Access Only (Specify parking/docking facilities) _____

Other (explain): _____

Is there any easements or covenants currently restricting this property: Yes No

If yes, please describe: _____

Are the lands within an area designated under provincial plan(s)? Yes No

If yes, please include an explanation in the Planning Rationale. Attached

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5. Existing Use of Land (give detailed description)

6. Present Zoning or Development Permit Category(ies)

7. Present Official Plan Designation(s)

Please indicate the land uses authorized by the existing Official Plan designation.

8. Details of Proposed Official Plan Amendment

i) Does the requested amendment add, replace, amend or remove policy?

Add Replace Amend Remove

Please include the policy to be added, replaced, amended or removed in the rationale.

Proposed text changes outlined in rationale

N/A (Mapping Change Only)

ii) Which land uses will the Official Plan Amendment authorize?

iii) Does the requested amendment replace or amend a designation in the Official Plan

Yes, proposed changes detailed in rationale

N/A

iv) Does the requested amendment alter an existing boundary or establish a new boundary for a settlement area?

Yes, Official Plan policies to address the alteration or new boundary detailed in rationale.

N/A

v) Does the requested amendment remove the subject land from an area of employment?

Yes, Official Plan policies to address the removal detailed in rationale.

N/A

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9. Municipal Services/Storm Drainage

Water Supply:

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Water Available | <input type="checkbox"/> Connected |
| <input type="checkbox"/> Sanitary Sewer Available | <input type="checkbox"/> Connected |

If requested amendment permits development on a privately owned and operated individual communal septic system, would more than 4,500 liters of effluent be produced per day as a result of the development being completed?

- Yes, servicing report or hydrogeological report attached. No

Is the storm drainage provided by sewers, ditches, swales or other means? Please specify.

10. Application History

a) Is the subject property or land within 120 m subject to any of the following applications?

Application	Yes	No	Unknown	File # and Status
Official Plan Amendment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Zoning By-law Amendment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Plan of Subdivision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Site Plan Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Consent (Severance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Minor Variance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

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b) If the answer to any application listed under question 10.a) is "yes", please identify the land the application effects and its purpose and effect on the requested amendment.

11. Supplementary Information (to be attached to this application)

Planning Rationale: Rationale from the applicant or agent explaining the proposed Official Plan Amendment and reasons for the application. If applicable, describe how the proposed Official Plan Amendment conforms with the Provincial Policy Statement (PPS) issued under subsection 3(1) of the *Planning Act* and includes the information outlined in Question #8.

Attached

Additional Information: Other supporting information that may be required to support this application, as outlined in the consultation.

Copy of Transfer Document/Deed Attached

Copy of Existing Survey or Plan, if applicable

Proposed Public Consultation Strategy Attached

Please provide large plans folded instead of rolled.

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Statutory Declaration

I/We, _____ of (the town/township) _____
in the country/district/region of _____ solemnly declare that:

- i) All above statements and the information contained in this application and all of the additional information transmitted herewith 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;
- ii) The Corporation of the Town of Smiths Falls staff, committee members, councilors and their designates are authorized to enter the property for the purposes of assessing this application so long as the file remains open; and,
- iii) Should the Corporation of the Town of Smiths Falls incur professional or legal costs beyond the application fee which are associated with the application, I/we will be responsible for reimbursing such costs to the Town upon invoice.

Declared before me at the town/township of

Signature of Applicant

in the County/District/Region of

Signature of Applicant

This _____ Day of _____, 20 _____

Commissioner of Oaths

*To be witnessed by a Commissioner for taking affidavits. If joint ownership, signature of each individual is required. If the applicant is a corporation, the application shall be signed by an Officer of the corporation and the corporation's seal shall be affixed to such signature.

Owner's Authorization for Agent to Make Application (Complete if Agent Appointed)

I/We, _____ am/are the owner(s) of the land
and that is subject of this application for amendment to the Official Plan; and,

I, We authorize _____
to make this application on my/our behalf.

Signature of Owner(s)

Date

Signature of Owner(s)

Date