



APPLICATION FOR SITE PLAN CONTROL

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 9.

3. Required fee

The cost of a Site Plan Control application is \$2000 for major site plans and \$1000 for minor site plans. The cost of a formal amendment to an existing site plan approval is \$1000. This fee is payable to the Town of Smiths Falls by cash, debit or certified cheque. The fee is required upon submission of the application.

4. 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 \$1,155, 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.

5. Submission

The applicant must forward two (2) full size 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

More information can be found at www.Ontario.ca – "Site Plan Control Guide"

APPLICATION FOR SITE PLAN CONTROL

(Sect 41, Planning Act RSO 1990)

Office
Use

File #

Date Received:

Complete Date:

Fee Paid/Date:

The undersigned hereby applies to the Town of Smiths Falls for Site Plan Control under section 41 of the *Planning Act* in respect of the lands herein after 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 is required (see last page). 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): _____

Reg. 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 proposal justification. Justification Attached

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5. Existing Use of Land (give detailed description)

Length of time uses have continued (if known):

6. Present Zoning Category(ies)

7. Present Official Plan Designation(s)

8. Detail of Proposed Site Plan

I am applying for a:

New Site Plan

Site Plan Amendment

Virtual/in-person pre-consultation occurred with Town staff on: _____

Estimated Cost of Proposed Work: _____

Estimated Start Date: _____

Estimated Completion Date: _____

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9. Description of Existing Buildings/Structures (add a separate sheet if necessary)

Note: All measurements must be provided in meters.

1. Existing:

Proposed for demolition

Building/Structure Use _____ No. of Storeys _____

Date of Construction _____ Ground Floor Area _____ Gross Floor Area _____

Width _____ Length _____ Height _____

Setbacks: Side Yards (R) _____ (L) _____ Rear Yard _____ Front Yard _____

2. Existing:

Proposed for demolition

Building/Structure Use _____ No. of Storeys _____

Date of Construction _____ Ground Floor Area _____ Gross Floor Area _____

Width _____ Length _____ Height _____

Setbacks: Side Yards (R) _____ (L) _____ Rear Yard _____ Front Yard _____

3. Existing:

Proposed for demolition

Building/Structure Use _____ No. of Storeys _____

Date of Construction _____ Ground Floor Area _____ Gross Floor Area _____

Width _____ Length _____ Height _____

Setbacks: Side Yards (R) _____ (L) _____ Rear Yard _____ Front Yard _____

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10. Description of Proposed Building/Structure (add a separate sheet if necessary)

Note: All measurements must be provided in meters.

1. Proposed:

Building/Structure Use _____ No. of Storeys _____

Date of Construction _____ Ground Floor Area _____ Gross Floor Area _____

Width _____ Length _____ Height _____

Setbacks: Side Yards (R) _____ (L) _____ Rear Yard _____ Front Yard _____

2. Proposed:

Building/Structure Use _____ No. of Storeys _____

Date of Construction _____ Ground Floor Area _____ Gross Floor Area _____

Width _____ Length _____ Height _____

Setbacks: Side Yards (R) _____ (L) _____ Rear Yard _____ Front Yard _____

3. Proposed:

Building/Structure Use _____ No. of Storeys _____

Date of Construction _____ Ground Floor Area _____ Gross Floor Area _____

Width _____ Length _____ Height _____

Setbacks: Side Yards (R) _____ (L) _____ Rear Yard _____ Front Yard _____

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11. Application History

a) Is the subject property 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"/>	_____

b) Has the subject land ever been the subject of an application for approval of a Plan of Subdivision under Sec. 51 of the *Planning Act* or a consent under Sec. 53 of the *Planning Act*?

Yes

No

If yes, please indicate the file number and status of the application:

File # _____ Status _____

c) If a consent has been acquired for this property in the past, please indicate the date and name on the transfer and the uses of the severed land.

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

Supporting Documentation: Supporting documentation is required to support this application, as outlined in the pre-consultation with Town Staff. Please indicate which attachments have been provided:

Site Plan	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Elevations and Cross Section view	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Grading and Servicing Plan	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Landscape Plan	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Stormwater Management Study/Brief	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Traffic Impact Study Study/Brief	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Environmental Impact Statement	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Copy of Existing Survey or Plan	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Deed/Transfer Document	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Noise and Vibration Study	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Heritage Impact Study	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A
Other Documents Specified by the Town	<input type="checkbox"/>	Attached	<input type="checkbox"/>	N/A

*Supporting documentation must be completed in accordance with Site Plan Checklist, being schedule 'A' of by-law 10362-2022 to the satisfaction of the Town.

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 Site Plan Control; and,

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

Signature of Owner(s)

Date

Signature of Owner(s)

Date