



Request for Pre-consultation Zoning By-law Amendments & Site Plan Application

(Sections 34 & 41 of the Planning Act, R.S.O. 1990, c. P.13, as amended)

For Use by Principal Authority	
File Number:	Date Received:
Roll Number:	Pre-consultation Date:
Property Address:	
Designation:	Zone:
Type Pre-consultation: <input type="checkbox"/> Site Plan Approval <input type="checkbox"/> Zoning By-law Amendment	

Owner Information		
Name of Owner(s):		
Address (Building/Fire Number, Street Name)		
City, Province, Postal Code		
Phone:	Cell:	Fax:
Email:		
Agent Information (if authorized by the owner):		
Name of Agent:		
Address (Building/Fire Number, Street Name)		
City, Province, Postal Code		
Phone:	Cell:	Fax:
Email:		
Agent to Submit Pre-consultation Request (to be completed by owner):		
If the applicant is not the owner of the land(s) that is subject to the application, confirmation by the owner that the agent is authorized to request a pre-consultation meeting on his / her behalf must be completed below:		
I / we _____ the registered owner(s) of <i>(print: name of owner(s))</i>		
_____ hereby authorize <i>(municipal address or legal description)</i>		
_____ to act as an agent for this Pre-consultation Request. <i>(print: name of agent)</i>		
_____	_____	
<i>(Date)</i>	<i>(Signature of Owner)</i>	

Property Information:				
Legal Description of the subject land:				
Lot	Concession	Ward	Registered Plan No.	Lot/Block
Street Address			Reference Plan	Part Number
Current Land Uses:				
Please describe the current uses on the property.				
Water is provided to the subject land by:				
<input type="checkbox"/>	Privately-owned / operated individual well		<input type="checkbox"/>	Publicly-owned/operated piped water system
<input type="checkbox"/>	Privately-owned / operated communal well		<input type="checkbox"/>	Lake or other water body
<input type="checkbox"/>	Other (specify): _____			
Sewage Disposal is provided to the subject land by:				
<input type="checkbox"/>	Privately-owned / operated individual septic system		<input type="checkbox"/>	Publicly-owned / operated sanitary sewage system
<input type="checkbox"/>	Privately-owned / operated communal sewage system		<input type="checkbox"/>	Privy
<input type="checkbox"/>	Other (specify): _____			
If known, please indicate if the proposed development on privately owned / operated individual or communal septic system will create more than 10,000 Litres of effluent per day:				
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
Storm Drainage is provided to the subject land by:				
<input type="checkbox"/>	Sewers		<input type="checkbox"/>	Ditches
<input type="checkbox"/>	Swales		<input type="checkbox"/>	Other (specify): _____

Development Proposal:

Please provide a written description of the proposed development and complete the table as applicable. Please note that it is recognized that this is a development proposal and that elements of the proposal are subject to change.

Proposed Structures(s):

Proposed Land Use:	Type of Use		Area
Residential		Number of Dwelling / Units	
	Single Detached		
	Semi Detached		
	Duplex		
	Townhomes		
	Apartments		
	Total		
		Total GFA of Buildings	
Commercial	Gross Floor Area of Buildings		
Industrial	Gross Floor Area of Buildings		
Institutional (specify)	Gross Floor Area of Buildings		
Park / Open Space			
Roads			
Other (specify)			
	Total		

Additional Information:

Please describe any site alteration or grading on the subject lands, including adding earth or other material:

Please outline any existing or previous industrial or commercial use on the subject or adjacent lands:

Please provide any additional information that may be of assistant in reviewing the proposal:

Pre-consultation Request should include the following:

- Completed Pre-consultation Request Form
- Digital Copy (.pdf) of Concept Plan(s)
- Digital Copy (.pdf) of Survey (if available)
- Proof of ownership and completed authorization from the property owner (if applicable).