



Permit for the Injury or Removal of Trees Application

Town of Collingwood

Planning Services

Phone: 705-445-1030

Email: planning@collingwood.ca

Office use only:
Reference #:

Please Read Before Completing Application

The applicant is responsible for ensuring the accuracy of all submitted materials. A complete application submission must include:

- This form, completed in full, and including all required signatures (**digital signatures accepted**)
- A reference plan, survey, and/or site plan showing the following, in metric units, as applicable:
 - the boundaries and dimensions of the subject property
 - the location, width, and name of any roads within or abutting the subject property, indicating whether it is an unopened road allowance, a public travelled road, a private road, or a right-of-way
 - the approximate location of all natural and artificial features (*for example, buildings, railways, roads, watercourses, drainage ditches, banks of rivers or streams, wetlands, wooded areas, wells and septic tanks*) that,
 - i. are located on the subject property and on land that is adjacent to it, and
 - ii. in the applicant's opinion, may affect the application
 - location, extent, and size of areas(s) where trees are proposed to be injured or removed
 - location, extent, and size of areas(s) where trees are proposed to be protected and retained
 - location, extent, and size of area(s) where trees are proposed to be replanted
- Tree Inventory and Assessment Report, prepared by a qualified professional, as outlined in the Town's Tree By-Law #2012-084, as may be amended
- Application fee and contingency deposit (as per current [Fees & Service Charges](#))
- Completed and signed [Additional Costs Deposit Agreement](#)

Applications are accepted through the Town's Public Portal by registering for an account. To register and/or apply, please [visit the secure Portal](#).

Additional information may be requested during the review of this application.

1. Applicant Information:

First Name: _____ Last Name: _____

Company Name (if applicable): _____

Street #: _____ Street Name: _____ Unit #: _____

Mailing Address (if different): _____

Town/City: _____ Province: _____ Postal Code: _____

Country: _____ Primary Phone #: _____

Email: _____ Alternate Phone #: _____

Additional Contacts for this application, including but not limited to, an Engineer, Designer, Landscape Architect, Architect, Solicitor, etc. may be [added to the Portal](#) on the Contacts page. Contacts added will each require a registered Portal account in order to view contents of the application online. Questions? Email planning@collingwood.ca

2. Registered Property Owner Information:

Is the registered owner the same as the Applicant in Section 1 above?

Yes No ***If No***, please complete the following:

First Name: _____ Last Name: _____

Company Name (if applicable): _____

Street #: _____ Street Name: _____ Unit #: _____

Mailing Address (if different): _____

Town/City: _____ Province: _____ Postal Code: _____

Country: _____ Primary Phone #: _____

Email: _____ Alternate Phone #: _____

Additional Property Owner(s)? Please provide additional owner information on an attached separate page.

3. Property Information:

Civic Address: _____

Legal Description (Lot/Concession/Plan/Block): _____

Registered Plan #: _____

Assessment Roll Number or PIN: _____

Size of the subject property (in hectares): _____

Provide the current Town of Collingwood Official Plan and Zoning By-Law designations below:

Official Plan Designation:	
Zoning By-Law Designation:	

Are the trees located in any of the following (check all that apply):

a Woodland (as defined per By-Law #2012-084)

an area regulated by the Nottawasaga Valley Conservation Authority or the Grey Sauble Conservation Authority

a Tree Preservation and Protection Plan previously approved by the Town

lands where there are no active development applications being considered by the Town

4. Details of Proposed Work:

Provide a summary of the proposed work, including reasons for the proposed injury or removal of trees:

Complete the following Tree Information:

Tree Species	# of Trees	Approximate Age	Diameter at 1.4m

Please attach a separate page if more space is required.

Note: Location of trees proposed to be injured/removed to be shown on submitted drawing(s).

Does the proposed timeline comply with the [Migratory Bird Convention Act](#)? Yes No

Has the subject property ever been the subject of an application for any of the following under the *Planning Act*? **If yes**, include the file number and current status:

Type	Yes	No	File Number	Status
Plan of Subdivision or Condominium				
Consent				
Official Plan Amendment				
Zoning By-Law Amendment				
Minor Variance				
Site Plan Control				
Other – Specify:				

Please provide any additional information that may be useful in the review of this application

5. Permission for Access:

The owner(s) of the subject property, as identified in Section 2 of this form, hereby authorize Town staff, and any other applicable parties relevant to this application, to enter onto the subject property during regular business hours for the purpose of reviewing this application.

Print Name: _____

Signature: _____ Date: _____

Where there are multiple owners of the same property, only one authorized signature is required.

6. Authorization for Agent:

The owner(s) of the subject property, as identified in Section 2 of this form, do hereby authorize and appoint the person named below to act as agent for the purposes of this application:

Name of Agent: _____

Company Name (if applicable): _____

Street #: _____ Street Name: _____ Unit #: _____

Mailing Address (if different): _____

Town/City: _____ Province: _____ Postal Code: _____

Country: _____ Primary Phone #: _____

Email: _____ Alternate Phone #: _____

Signature: _____ Date: _____

Print Name: _____

Where there are multiple owners of the same property, only one authorized signature is required.

7. Declarations:

I, (print name) _____ of (name of City or Town) _____ in the _____ Region or _____ County of _____

solemnly declare that I am the (choose one of the following):

Owner of the subject property Agent for the Owner Officer/Employee of the Owner

and that in the matter of this application for the property as described above, I have examined the contents of, and any attachments to, this application, read and understood the information in this Declaration page, and hereby certify that the statements contained herein are true and accurate, insofar as I have knowledge of these facts. 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.

Applications must be complete and accurate to be processed. Incomplete or inaccurate applications will be returned for re-submission. The Town may deem an application to be incomplete and refuse all submitted information if it considers the quality of the submission unsatisfactory.

Personal information collected by the Town of Collingwood through this application including any information obtained during its processing, is collected under the authority of the Planning Act, Municipal Act, and the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), all as may be amended from time to time. Such information will form part of the public record, is subject to MFIPPA, and may be disclosed or published as part of Council agendas and/or public consultation processes.

By signing this Declaration and executing the Additional Costs Deposit Agreement, the parties acknowledge and agree that all required application fees and any costs incurred by the Town in processing this application, including peer review consultant fees, shall be borne by the applicant, agent, or owner.

Print Name: _____

Signature: _____ Date: _____

DECLARED before me] Signature of Commissioner:
at the _____ Town, or the _____ City]
of: _____]
in the _____ County, or the _____ Region] Commissioner's Stamp:
of: _____]
this _____ day]
of _____, 20____]