



Pre-consultation 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 pre-consultation application submission must include:

- This form, completed in full, and including all required signatures (**digital signatures accepted**)
- Proposed Concept Plan and/or Site Plan showing the following, (as applicable):
 - existing and proposed buildings (including their approximate size)
 - structures (including their approximate size)
 - property lines
 - setbacks
 - landscaping
 - parking
 - access
 - road allowances
 - easements
 - rights-of-way
 - services
- Application fee (as per current [Fees & Service Charges](#))

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. Type of Application:

Select the *Planning Act* application(s) this pre-consultation application is related to:
(Select all that apply)

Official Plan Amendment

Zoning By-Law Amendment

Site Plan Control

Draft Plan of Subdivision/Condominium

Minor Variance

Consent

Other: _____

2. Applicant Information:

Project Name: _____

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 #: _____

Purchaser or Purchaser's Agent? (for the property identified in Section 4)

If so, a copy of the portion of the agreement of purchase and sale that authorizes the purchaser to apply must be submitted with this application.

3. Registered Property Owner Information:

Is the registered owner the same as the Applicant in Section 2 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.

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

4. Property Information:

Civic Address: _____

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

Registered Plan #: _____ Frontage (m): _____

Depth (m): _____ Area(sq m or ha): _____

Assessment Roll Number or PIN: _____

Project Name (if applicable): _____

Indicate the type of access to the subject property:

Access Type	
Provincial Highway	
County Road	
Municipal Road, maintained	all year seasonally
Other Public Road or Right-of-way	
Other, including by water	Specify:

If access type is by a **provincial highway or county road**, a separate application to each authority may be required. Please review requirements with these authorities directly.

If access is by **water only**, identify the parking and docking facilities to be used and the approximate distance of these facilities from the subject land and the nearest public road:

Check the applicable water and sewage disposal servicing, and type of storm drainage below:

Water Service	Existing	Proposed
Municipal Servicing		
Private Well – Individual		
Private Well – Communal		
Bay or Other Water Body		
Other	Specify:	Specify:

Sewage Disposal	Existing	Proposed
Municipal Servicing		
Private – Individual		
Private – Communal		
Other	Specify:	Specify:

Type of Storm Drainage	Existing	Proposed
Sewers		
Ditches		
Swales		
Other	Specify:	Specify:

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

Official Plan Designation:	
Zoning By-Law Designation:	

Is the subject property within one of the following policy areas?

Policy Area	Yes	No
Property Designated under Part IV or V of the <i>Ontario Heritage Act</i>	Yes	No
<i>If yes, please specify area:</i>		
Secondary Plan Area	Yes	No
<i>If yes, please specify area:</i>		

Is the subject property within one of the following regulated areas?

Regulated Area	Yes	No
Intake Protection Zone (<i>South Georgian Bay Lake Simcoe Sourcewater Protection Plan, as amended</i>)	Yes	No
Wellhead Protection Area (<i>South Georgian Bay Lake Simcoe Sourcewater Protection Plan, as amended</i>)	Yes	No
Nottawasaga Valley Conservation Authority (NVCA)	Yes	No
Grey Sauble Conservation Authority (GSCA)	Yes	No

Check the current and proposed land use(s) for the subject property:

Land Uses	Current Use(s)	Proposed Use(s)
Residential		
Commercial		
Industrial/Employment Lands		
Vacant		
Community Services		
Other	Specify:	Specify:

What is the length of time the existing use(s) have continued on the subject property?

Are there any buildings or structures existing or proposed on the subject property?

Yes No

If Yes, complete the following tables, as applicable, for **each** building or structure (in metric units):
(attach separate page if necessary)

Existing	Type	Front Setback (m)	Rear Setback (m)	Side Setback (m)	Side Setback (m)	Height (m)	Dimensions/Floor Area (m ²)	Approximate Date of Construction
#1:								
#2:								
#3:								
#4:								

Proposed	Type	Front Setback (m)	Rear Setback (m)	Side Setback (m)	Side Setback (m)	Height (m)	Dimensions/Floor Area (m ²)
#1:							
#2:							
#3:							
#4:							

Has the subject property ever been the subject of an application for any of the following under the *Planning Act*? **If Yes**, include the reference or 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				
Minister's Zoning Order				
Other – Specify:				

5. Proposed Development Information:

Provide the **proposed** Official Plan and Zoning By-Law designations, if applicable, below:

Official Plan Designation:	
Zoning By-Law Designation:	

Please briefly describe the proposed development:

6. Permission for Access:

The owner(s) of the subject property, as identified in Section 3 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.

7. Authorization for Agent:

The owner(s) of the subject property, as identified in Section 3 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 #: _____

Print Name: _____

Signature: _____ Date: _____

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

8. 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
Purchaser of the subject property Agent for the Purchaser

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, accurate, and in accordance with the Planning Act, 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____]