



TO: The Corporation of the Town of Collingwood
Mailing: (small envelopes only) P.O. Box 157, Collingwood, ON L9Y3Z5
planning@collingwood.ca

FILE NO.: _____
(Municipal Use)

Project Name: _____

APPLICATION FOR:

- Deeming By-law (D1207)
- Part Lot Control By-law (D1206)
- Parking Exemptions (T07)

Collate two (2) complete sets folded 8 1/2" x 14" (216mm by 357mm) separately (no binding strip) held together by elastic bands. Your application is distributed electronically therefore we require digital information including documents, drawings, and supporting reports. The drawings are required in AutoCAD, DWG, and PDF file in release 2000 or newer.

Application Fees:

Our flat fee is non-refundable and payable upon submission of the application. Consult the Treasury Departments landing page for the current Fees & Charges <https://www.collingwood.ca/council-government/budget-taxes/fees-charges>

The Owner/Applicant/Agent acknowledges and agrees that:

In addition, under exceptional site circumstances, the Town may require further or other reports which it determines are necessary to address such exceptional circumstances.

Contingency fees will be utilized to cover costs associated with this application when deemed necessary by the Town of Collingwood, i.e. professional consultants and legal advice. Any portion of the contingency fee not used in connection with the review and completion of an application will be returned. The applicant further agrees to pay any additional costs and expenses beyond the initial contingency fee, which shall be determined by staff of the Corporation of the Town of Collingwood in the event that the amount of the initial contingency fee taken is insufficient.

Be aware that the Nottawasaga Valley Conservation Authority (NVCA) and the Grey Sauble Conservation Authority (GSCA) apply additional fees to planning applications. Contact the NVCA directly at 1-705-424-1479 or GSCA 1-519-376-3076 for information related to their respective fee submission(s) and application(s).

TO BE COMPLETED BY APPLICANT:

Project Name: _____

Project Address: _____

Project Description: _____

Legal Description: _____

Assessment Roll #: 4331 _____ PIN (Property Identifier No.): _____

Registered Owner & Contact Information (s): _____

Address: Street: _____ City: _____

Postal Code: _____ Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

1. Is the property affected by one or more of the following regulations?:

- The Source Water Protection Plan Intake Protection Zone or Wellhead Protection Area
- The Nottawasaga Valley Conservation Authority (N.V.C.A.)
- The Grey Sauble Conservation Authority (G.S.C.A.)
- The Town of Collingwood Heritage District

2. Is the subject land the subject of an application under the Planning Act, as amended for: *(Please check appropriate box)*

- | | | |
|-----------------------------|------------------------------|-----------------------------|
| (a) Official Plan Amendment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) Zoning By-Law Amendment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) Minor Variance | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) Plan of Subdivision | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) Site Plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (f) Plan of Condominium | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer is yes to any of the above, please specify the file number(s) and status of the application(s):

Send Communications to:

Applicant/Consultant/Project Manager (Indicate which applies): _____

Address: Street: _____ City: _____ Postal Code: _____

Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Zoning existing: _____ *proposed if applicable:* _____

Official Plan existing: _____ *proposed if applicable:* _____

Site Information: Water – Municipal _____ Private *(if applicable):* _____

Sewer – Municipal _____ Private *(if applicable):* _____

Proposed Uses: _____

Site Area (sq. m / ha): _____ # of Units _____

Building Area (sq. m) proposed _____ existing *(if applicable)* _____

Mezzanine Area (sq. m) proposed _____ existing *(if applicable)* _____

Exterior Materials & Colours _____

Legal Information for Agreement Preparation

Certificate of Title Required _____ Enclosed
Is the property mortgaged? _____ (Yes/No) Mortgagee: _____
Do you anticipate a new mortgage being added in the near future? _____
Who has authority to bind the corporation? (Name and Title) _____
Solicitor Contact Information: _____

OWNER'S AUTHORIZATION FOR AGENT

I/we _____ authorize _____
to act as our agent(s) for the purpose of this application. _____
(Signature of owner)

DATED at the of: _____ of _____,
(City or Town) (Which City or Town)
this _____ day of _____, 20 _____.

OWNER'S AUTHORIZATION FOR ACCESS

I/we, _____, of the _____
(City or Town)
_____ in the _____
(Which City or Town) (Region or County)

hereby permit the Town and its representatives to enter upon the property during regular business hours for the purpose of performing inspections of the property.

Signature of Owner Signature of Witness

SOLEMNLY DECLARE THAT:

All above statements and the statements contained in all of the exhibits transmitted herewith are true. 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. I am the registered owner of the above-noted property or the agent of the owner duly authorized on the owner's behalf.

DECLARED before me at the of _____ of _____
(City or Town) (Which City or Town)
in the _____ of _____ this _____ (Region or County)
(Which Region or County)
day of _____, 20 _____.

Signature of Owner/Applicant/Agent Signature of Commissioner

Please forward this application to your consultants to facilitate due-care between development disciplines.

**THE CORPORATION OF THE TOWN OF COLLINGWOOD APPLICATION FOR DEEMING BY-LAW,
and Part-Lot Control, and Parking Exemption. 2020**

Collate two (2) complete sets folded 8 1/2" x 14" (216mm by 357mm) separately (no binding strip) held together by elastic bands. Your application is distributed electronically therefore we require digital information including documents, drawings, and supporting reports. The drawings are required in AutoCAD, DWG, and PDF file in release 2000 or newer. Submissions for OPA's and ZBA's must be submitted in draft format in *.pdf* and *Word Format* including the application description.

(Please Complete and Submit with Plans)

	Deeming By-Law Requirements	Part-Lot Control	Parking Exemptions	
M - Plan		2		
Sketch Plan of Proposed Area	As required	2	2	
Electronic Information	All associated information	All associated information	All associated information	
Survey		2	2	
Completed Application Form	2	2	2	
Appropriate Fee	1	1	1	

This application continues on the next page

FILE NO.: _____
(Municipality Use)

Contact Information:

Project Name: _____

Registered Owner: _____

Agent:

Name: _____

Address: Street: _____ City: _____

Postal Code: _____ Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Solicitor:

Name: _____

Address: Street: _____ City: _____

Postal Code: _____ Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Engineer:

Name: _____

Address: Street: _____ City: _____

Postal Code: _____ Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Landscape Architect:

Name: _____

Address: Street: _____ City: _____

Postal Code: _____ Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Architect:

Name: _____

Address: Street: _____ City: _____

Postal Code: _____ Land Line: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Additional Information or Contacts:

Freedom of Information

Personal information on this form is collected under the authority of the *Planning Act*, R.S.O 1990, c. P.13, as amended and will be used to contact the applicant regarding progress of their application. This information will be used by the Town and relevant agencies for processing of this application and will also be available to members of the public inquiring about the application and is subject to the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. M.56, as amended. Questions about this procedure should be directed to Planning Services, Town of Collingwood Municipal Offices 55 Ste. Marie Street, Unit 302, Collingwood, ON . P.O. Box 157, L9Y 3Z5 705-445-1290 Fax: 705-445-1463 Extension: 3269