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For office use only	File #	_
Received	, 20	
Considered Complete _	, 20	

Application for Minor Variance or for Permission

Planning Act, RSO 1990, 0. Reg. 200/96, Amended by O.Reg. 432/96 & 508/98

Minor Variance	2023 Fee effective Jan 1/2023
Minor Variance (1 or 2)	\$1,607.00
Minor Variance (3 or more)	\$2,067.00

Each application must be accompanied by the application fee in the form of a cheque payable to the <u>local municipality</u>.

The undersigned hereby applies to the Comr	nittee of the Adjustment for the
ACW.	(name of Municipality) under
Section 45 of the Planning Act 1990 for relief	, as described in this application, from
By-law No (as amended).	
1. Name of Owner: Tin + Trucy	Aldrich .
Phone Number:	Email:
Address:	***************************************
Name of Agent (if applicable):	
Phone Number:E	Email:
Address:	

any.	
3. Legal Description and address of property:	
Ward: ACW Concession:	
Lot: Profest Registered Plan #: Pt 4 on plan 22/6984 582 Ashfield	
Ward: ACW Concession: Lot: Ptoflot1 Registered Plan #: Pt 4 on plan 22 plage 982 Ashfield 911 Address and Road Name: 33807 South 5t. Port Albert	-
Note: If property legal description and address are approved, all numbers following will need to be changed.	
Names and addresses of any mortgages, holders or charges or other encumbrances:	
5. Nature and extent of relief applied for: car Garage on Side of house	
6. Why is it not possible to comply with the provisions of the by-law?	
 Legal description of subject land (registered plan number and lot number or other legal description and, where applicable, street and street number): 	
Ward: ACW	
Concession: Lot:/ Registered Plan #:	7
Roll Number:	
911 Address and Road Name: 33807 South St, Port Albert	
8. Is any of the subject land in Wellhead Protection Area C? □Yes ☑No □ Unknown	
If yes , please obtain a Restricted Land Use Permit from the Risk Management Official. If Unknown , please consult with your Municipal Planner and obtain a Restricted Land Use Permit if necessary.	

Note: Unless otherwise requested, all communications will be sent to the agent, if

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maintained all year or seasonally, another public road or right of way: Township Read, Ver Round access
10. Will this proposal result in adding or changing the location of any driveways/accesses/entrances? □Yes ☑No
11. Dimensions of Land affected:
Frontage: 67.95 m Area: 7,617.19 m²
Frontage: 67.95 m Area: 7,617.19 m² Depth: 112.10 m Width of Street: 40'
12. Particulars of all buildings and structures on or proposed for the subject land (Specify ground floor area, number of storeys, width, length, height, etc.):
Existing: See drawing
Proposed:
 Location of all buildings and structures on or proposed for the subject land (Specify distance from side, rear and front lot lines)
Existing: See drawing
Proposed:
14. Date of acquisition of subject land: Qugus + 2021
15. Date of construction of all buildings and structures on subject land: House 1996
15. Date of construction of all buildings and structures on subject land: House 1996 16. Existing uses of the subject property: 16. Existing uses of the subject property:

17. Existing uses of abutting properties: 251 dos - farm field with 151 de - Vacant Land with empty Barn.
I Ilde Empty Bain.
18. Length of time the existing uses of the subject property have continued:
19. Municipal services available: (check all that apply)
□ Water – Connected
☐ Publicly Owned
Privately Owned
□ Communal Well
□ Lake
☐ Sewage Disposal – Connected
☐ Sanitary Sewers
☐ Septic System
□ Privy
□ Storm Drainage – Connected
☐ Storm Sewers
□ Ditches
□ Swales
□ Other
20. Is this property assessed to a Municipal Drain? ☐Yes ☐No
21. Is there a tile drain loan for this property or has an application for a tile drain loan been submitted to the Municipality within the last 90 days? □Yes ☑No
22. Present Official Plan provisions applying to the land:

23. Present Zoning By-law provisions applying to the land:

24. F	las the owner previously applied for relief in respect of the subject property?
Yes	☑ No □
If the	e answer is yes, describe briefly: To build storage shed at Roar of property
	Applicants are strongly encouraged to contact the County and speak/meet with the Planner to the Municipality before submitting an application for information.
Date	e of Applicant's consultation meeting with County Planner:
	the Planner advised the Applicant that this application needs to be reviewed by the on County Biologist for comments on Natural Heritage matters?
□Y€	es-please submit a fee of \$224.00 made payable to the Treasurer, County of Huron
□No	
	s the subject property the subject of a current application for consent or plan of subdivision under the Planning Act ?
□Y€	es 🗹 No If yes, please indicate file number:
Note	es:
a)	It is required thatcopies of this application be filed with the Secretary-
	Treasurer of the Committee of Adjustment, together with the plan referred to in
	Note 2, accommodated by a fee of \$ in cash or by cheque made
	payable to the Treasurer of the
	(Name of Municipality/Township)
b)	Each copy of this application must be accompanied by a plan showing the dimensions of the subject land and all abutting land; the location, size and type of all existing and proposed buildings and structures on the subject land indicating the distance of the buildings from the lot lines; approximate location of all natural and artificial features on the subject and adjacent lands; location, width and name of roads; location of easements; and use of adjacent lands. The Committee of Adjustment may require that the plan be signed by an Ontario Land Surveyor.

Owner's Authorization
(This must be completed by the owner if the owner is not filing the application.)
I/We, being the registered owner(s) of
the subject lands, hereby authorizeto
prepare and submit an application of Minor Variance.
Signature of Owner:
Date:
APPLICANT'S DELCARATION (This must be completed by the Person Filing the Application for the proposed development site.)
(Name of Applicant) of the ACW (Name of Town, Township etc.)
In the Region/County/District // urain solemnly declares that all of the statements contained in this application and supporting documentation are true and complete, and 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 path, and by virtue of the "Canada Evidence Act."

Please be advised the responsibility for filing a complete application rests solely with the owner/applicant. Anything not requested or applied for in this application and subsequently found to be necessary (which may require another application(s) and fee(s)) are the sole responsibility of the owner/applicant.

The County/Municipality will address only the application as applied for, and any items that are not included in the application are not the responsibility of the County/Municipality.

All studies required to support this application shall be at the expense of the applicant and included at the time of submission as a complete application.

In the event of third-party appeals to applications approved by the County/Municipality, the applicant may be responsible for some of all of the legal and other costs incurred by the County/Municipality, at the discretion of the County/Municipality.

In addition to the application fee, where the County/Municipality requires assistance from its solicitors or other technical or professional consultants in the processing of this application, the applicant shall be responsible for reimbursing all legal and consulting fees incurred by the County/Municipality, at the County/Municipality's actual cost. Depending on the amount of such fees, which the County/Municipality expects to incur on any given application, the County/Municipality may also require the applicant to enter

into an agreement with respect to the payment of such fees and may, where appropriate, require security to be posted.
I/we Tem Aldered hereby agree to pay all fees incurred by the County/Municipality related to the review of this application.
Declared before me at:
Region/County/District
In the Municipality of ACW
Signature Jim own
This / day of /vac /23 (Month) (Year)
Please Print Name of Applicant Tran Aldrich
Commissioner of Oaths William Commissioner of Oaths

Kaitlin Bos, Deputy Clerk Township of Ashfield-Colborne-Wawanosh Commissioner for Taking Oaths etc.

OWNER/APPLICANT'S CONSENT DECLARATION

In accordance with the provisions of the Planning Act, it is the policy of the County Planning Department to provide the public access to all development applications and supporting documentation.

In submitting this development application and supporting documentation, I,
the above-noted policy and provide my consent, in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agents, consultants and solicitors, will be part of the public record and will also be available to the general public.
I hereby authorize the County of Huron staff, Municipal staff and council members of the decision making authority to access to the subject site for purposes of evaluation of the subject application.
Signature / Com
Date
OFFICE USE ONLY
CERTIFICATION
I,of
in the of
Certify that the above application is a true copy.
Date this, 20
Signature

Complete this form to determine if septic comments are required on your planning application

For certain planning applications, comments are required from local municipal staff to assist the municipality in its decision on your application. This sheet will determine if comments are required from local staff, and if so, the appropriate fee* must be submitted with your application and paid to the local municipality (*based on the local municipality's Fee Schedule – consult with your Planner to determine).

Name of Applicant: Tim Aldrich
Name of Owner (if different from the applicant):
Location of Property (Lot, Concession or Registered Plan, and Municipality):
Type of Planning Application(s) submitted with this form:
□ Consent (Severance)
☐ Zoning By-Law Amendment
☐ Official Plan Amendment
Minor Variance
☐ Plan of Subdivision/Condominium
Please answer Section A or Section B, depending on the type of servicing available. In the following question, "property" means the subject property or, in the case of a severance, each of the resulting lots.
Section A – Where Sanitary Sewers are available
Is the property within 183 metres (600 feet) of an abattoir (slaughter house)?
□ Yes ☑ No
Section B – Where Septic Systems are required
 The application is for the creation of a new lot for which the primary use will be a dew dwelling (other than a new dwelling on a farm)
2. Is the property less than .4 hectares (1 acre) in area? ✓ Yes □ No
3. Does the property have less than .2 hectares (1/2 acre) of "useable land" for a septic tank and tile bed? See definition of "useable land" below.
□ Yes □ No

4. I alli uncertain of the location of the existing septic tank and tile bed on the property.
□ Yes □ No
5. There will be more than one dwelling unit on each lot.
□ Yes □ No
6. An industrial or commercial use is proposed which will require a septic system.
□ Yes □ No
7. Is the property with 183 metres (600 feet) of an abattoir (slaughter house)?
□ Yes □ No
8. The application is for a new Plan of Subdivision/Condominium
□ Yes □ No
"Useable Land" means an area of land with suitable original soil for the installation of a Class 4 subsurface sewage disposal system, free of any buildings, structures swimming pools, etc. and such land is or will be used solely for a septic tank and tie bed and any future replacement of the tile bed, and which area is at least 3 metres (10 feet from any property line, at least 15 metres (15 feet) from a top-of-bank of a watercourse or lake, not located in a flood plain, not located in an environmentally sensitive area, and does not contain field tile or other artificial drainage. (Other restrictions may apply according to legislation.)
Name of Owner or Designated Agent Tim Aldrick
Signature from Um.
Signature // Com
To be completed by Municipal Clerk: Has the Septic Review Fee, made payable to the local municipality, been collected from the applicant? *Please note type of application and file # on the cheque.
□ Yes □ No Amount:
Name of Clerk-Treasurer
Signature
Date

