



File No. A- \_\_\_\_\_

Roll No. \_\_\_\_\_

## APPLICATION FOR MINOR VARIANCE OR FOR PERMISSION

### Township of Blandford-Blenheim Committee of Adjustment

The undersigned hereby applies to the Committee of Adjustment for the Township of Blandford-Blenheim under Section 44 of the Planning Act, 1990, for relief, as described in this application, from By-Law No. 1360-2002 (as amended).

1. **Name of Owner** \_\_\_\_\_ **Telephone Number** \_\_\_\_\_

**Address** \_\_\_\_\_

**Postal Code** \_\_\_\_\_ **Email/Fax No.** \_\_\_\_\_

2. **Name of Agent (if any)** \_\_\_\_\_ **Telephone Number** \_\_\_\_\_

**Address** \_\_\_\_\_

**Postal Code** \_\_\_\_\_ **Email/Fax No.** \_\_\_\_\_

**Note:** Unless otherwise requested, all communications will be sent to this agent, if any.

3. **Names and addresses** of any mortgagees, holders of charges or other encumbrances:

\_\_\_\_\_  
\_\_\_\_\_

4. **Nature and extent** of relief applied for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

a) If the application is for a second residence of a farm:

i) Area of Total farm holdings \_\_\_\_\_

ii) Who will occupy the proposed second residence? (describe relationship to owner, if any)

\_\_\_\_\_

iii) The proposed second residence will be a:

permanent residence  mobile home  other (specify) \_\_\_\_\_

b) If the application is to expand or establish a farm operation:

i) Area of Total farm holdings \_\_\_\_\_

ii) Describe briefly the type and size of proposed farm operation (number and type of livestock, type of crop, crop acreages, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

iii) Has an application been made to the Ontario Ministry of Agriculture, Food and Rural Affairs for a Certificate of Compliance?  yes  no

iv) Describe the method of manure disposal used in the farm operation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. Why is not possible to comply with the Provisions of the By-Law?

\_\_\_\_\_  
\_\_\_\_\_

6. Legal description of subject land:

Lot Number(s) \_\_\_\_\_ Plan Number or Concession \_\_\_\_\_

Part Number(s) \_\_\_\_\_ Reference Plan Number \_\_\_\_\_

911# / Street Address (if any) \_\_\_\_\_

The lot is located on the \_\_\_\_\_ side of the Street lying between \_\_\_\_\_ Street and \_\_\_\_\_ Street.

7. Dimensions of land affected:

Frontage \_\_\_\_\_ Depth (average) \_\_\_\_\_

Area \_\_\_\_\_ Width of Street \_\_\_\_\_

8. Particulars of all buildings and structures on or proposed for the subject land: (Specify ground floor area, gross floor area, number of storeys, width, length, height, etc.).

Existing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Location of all buildings and structures on or proposed for the subject land: (Specify distance from side, rear and front lot lines.) see attached sketch plan

Existing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Date of acquisition of subject land: \_\_\_\_\_

11. Date of Construction of all buildings and structures on subject land (if known): \_\_\_\_\_  
\_\_\_\_\_

12. Existing uses of the subject property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Existing uses of abutting properties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Length of time the existing uses of the subject property have continued: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Municipal Services available: (Check appropriate box or boxes)

Water	<input type="checkbox"/>	Connected	yes	<input type="checkbox"/>	no	<input type="checkbox"/>
Sanitary Sewers	<input type="checkbox"/>	Connected	yes	<input type="checkbox"/>	no	<input type="checkbox"/>
Storm Sewers	<input type="checkbox"/>					

16. Present Official Plan provisions applying to the land: \_\_\_\_\_  
\_\_\_\_\_

17. Present Zoning By-Law provisions applying to the land: \_\_\_\_\_  
\_\_\_\_\_

18. Has the owner previously applied for relief in respect of the subject property?

Yes  No

If the answer is yes, describe briefly \_\_\_\_\_  
\_\_\_\_\_

19. Is the subject property the subject of a current application for consent under Section 53 of the Planning Act, 1990?

Yes  No

If the applicant is not the owner of the land that is the subject of this application, the written authorization of the owner that the applicant is authorized to make the application must be included with this form, or the authorization set out below must be completed. (See Item 4 in the Zone Change Application Guide attached.)

**Authorization of Owner(s) for Applicant/Agent to Make the Application**

I/We, \_\_\_\_\_, am/are the owner(s) of the land that is the subject of this application for zone change and I/We authorize \_\_\_\_\_, to make this application on my/our behalf.

\_\_\_\_\_  
Date Signature of Owner(s) Signature of Owner(s)

**THIS SECTION TO BE COMPLETED IN THE PRESENCE OF A COMMISSIONER FOR TAKING AFFIDAVITS**

I/We \_\_\_\_\_ of the \_\_\_\_\_  
of \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_,

**DO SOLEMNLY DECLARE THAT:**

All of the prescribed information contained in this application is true and that the information contained in the documents that may accompany this application is true 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 oath and by virtue of the Canada Evidence Act.

DECLARED before me at the \_\_\_\_\_

of \_\_\_\_\_ in the \_\_\_\_\_

\_\_\_\_\_  
Owner(s)/Applicant

\_\_\_\_\_ of \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Owner(s)/Applicant

\_\_\_\_\_  
A Commissioner for Taking Affidavits

- Notes:**
- 1. It is required that one (1) original** of this application be filed with the Secretary-Treasurer of the Committee of Adjustment together with the plan referred to in Note 2 accompanied by a fee of **\$600.00** (\$500.00 + \$100.00 County Public Works Review Fee) in cash or cheque made payable to the **Treasurer, Township of Blandford-Blenheim**.
  - 2. Each copy** of this application must be accompanied by a plan showing the dimensions of the subject land, and all abutting land and showing the location, size, and type of all buildings and structures on the subject and abutting land. The Committee of Adjustment may require that the plan be signed by an Ontario Land Surveyor.

# SKETCH/SITE PLAN

USE THIS PAGE FOR SKETCH (OR SURVEY PLAN IF AVAILABLE) AND ATTACH TO APPLICATION FORM.  
WITHOUT SKETCH OR SURVEY PLAN, THE APPLICATION WILL NOT BE PROCESSED.

