



Development Services
 150 Mary Street
 Milton ON L9T 2T8
 905-878-7252 ext. 2398

The Planning Act, R.S.O. 1990, C.P.13, as amended

APPLICATION FOR CONSENT

<i>Office Use:</i>	
Date Received	File Number:

THIS APPLICATION IS TO BE COMPLETED IN FULL OR IT WILL BE RETURNED

REGISTERED OWNER(S) <i>(INDICATE ALL REGISTERED OWNERS AS SHOWN ON PROPERTY DEED)</i>		
Property Owner(s):		
Address:	City:	Postal Code:
Phone:	Email:	

AUTHORIZED AGENT INFORMATION		
Agent/Applicant:		
Address:	City:	Postal Code:
Phone:	Email:	

SOLICITOR <i>(FOR REGISTRATION OF CONSENT AND/OR CONTACT OTHER THAN AGENT)</i>		
Agent/Applicant:		
Address:	City:	Postal Code:
Phone:	Email:	

Primary Contact for ALL Future Correspondence:		
<input type="checkbox"/> Owner <input type="checkbox"/> Authorized Agent <input type="checkbox"/> Solicitor		

PROPERTY INFORMATION <i>(COMPLETE IN FULL)</i>				
Lot		Concession:		Township
Lot/Block	Registered Plan:	Part(s):	Reference Plan:	PIN
Municipal Address:				
Property Assessment Roll Number:				
Are there any easements or restrictive covenants affecting the subject land? <input type="checkbox"/> Yes <input type="checkbox"/> No			If YES, provide description and show on plan. If NO, on what basis was this determination made?	

PURPOSE OF APPLICATION (Check all that apply):

- New Lot
 Lot Addition*
 Long Term Lease
 Permanent Easement or Right of Way
 Validation of Title
 A Charge
 Other

*Lot Addition - Pursuant to Section 50(12) of the *Planning Act*, legal confirmation is required as to how the lot to which the lands are proposed to be added was originally created.

If known, name of person(s) (e.g. purchaser/mortgagee/lessee) to whom land or interest in lands is intended to be transferred, charged or leased. If a lot addition, include municipal address of benefitting lands?

Please describe proposal:

HISTORY OF SUBJECT LANDS

Date Owner acquired the land:

Has any land been severed from the parcel originally acquired by the owner of the subject land?

- Yes
 No
 If Yes, provide for each parcel severed:

Date of Transfer: Name of Transferee: Land Use:

Has the subject land ever been the subject of an application for approval of plan of subdivision under Section 51 or Consent under Section 53 of the *Planning Act*?
 Yes
 No
 Unknown

If Yes, and if known, provide the file number, description and status of decision:

DESCRIPTION OF LAND TO BE SEVERED (Please specify) (metric measurements):

Frontage/Width:	Required Frontage:	Depth:	Area:
Existing Use:		Proposed Use:	
Number of Buildings:	Existing:	To Remain:	Proposed:
Access:	<input type="checkbox"/> Municipal Road	<input type="checkbox"/> Regional Road	<input type="checkbox"/> Provincial Highway
<input type="checkbox"/> Other (Specify):			
Is water provided publicly owned and operated water system? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is sewage disposal provided by publicly owned and operated sanitary sewage system? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes to either of the above, please specify:			

DESCRIPTION OF LAND TO BE <u>RETAINED</u> (Please specify) (metric measurments):			
Frontage/Width:	Required Frontage:	Depth:	Area:
Existing Use:		Proposed Use:	
Number of Buildings:	Existing:	To Remain:	Proposed:
Access: <input type="checkbox"/> Municipal Road	<input type="checkbox"/> Regional Road	<input type="checkbox"/> Provincial Highway	<input type="checkbox"/> Other (Specify):
Is water provided publicly owned and operated water system? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is sewage disposal provided by publicly owned and operated saniary sewage system? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes to either of the above, please specify:			

Land Use		
	Lands to be Severed	Lands to be Retained
Zoning By-law Designation:		
Local Official Plan Designation:		
Regional Official Plan Designation:		
How is the proposed application consistent with the Official Plan and Provincial Policy Statement?		

Conservation Authority Review Information
Is the property within a regulated area of a Conservation Authority? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: <input type="checkbox"/> Conservation Halton <input type="checkbox"/> Grand River CA <input type="checkbox"/> Credit Valley CA If yes, has the applicant contact CA? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, - Status:

If any of the following uses or features exists on the subject land or within 500 metres of the subject land, each must be shown on the required sketch and corresponding distances noted.		
Use or Feature	On the Subject Lands	Within 500 metres of the Subject Lands
Agricultural Operation, including facility or stockyard		
Sewage Treatment plant or waste stablization plan		
Provincially Significant Wetland		
Provincially Significant Wetland within 120 metres of site		
Floodplain		
An industrial or commercial use, specify		
Active Railway		

Potentially Contaminated Sites:		
Has there been industrial waste on the site?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, last date of use:
Has there been filling on the site?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Is there reason to believe the site may have been contaminated by former uses either on the site or on adjacent sites?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, on what basis was this determination made?	
If yes, an environmental investigation to the satisfaction of the Region of Halton is required. Report attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Current Planning Applications:

Is the application consistent with policy statements issued under Section 3(1) of the Planning Act?
 Yes No An explanation of how the applicant is consistent?

If yes, please explain.

Is the subject land within an area of land designated under any Provincial Plan(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, does the application conform to or conflict with the applicable Provincial Plan(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If known, is or was, the subject land the subject of any of the following development applications:

Regional Official Plan Amendment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Niagara Escarpment Commission Amendment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Parkway Belt Amendment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Minister's Zoning Order Amendment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Consent	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Local Official Plan Amendment:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Minor Variance:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Site Plan:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Plan of Subdivision/Condominium:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.
Zoning By-law Amendment:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	File No.

Validation of Title:

When did the contravention of Section 50 of the Planning Act or a predecessor thereof occur?

Please describe the nature of the contravention (attach schedule if required)

OTHER INFORMATION

Is there any other information that may be useful to the the Town or other agencies in reviewing this application. If so, explain below or attach a separate schedule.



Permissions by Owner or Authorized Agent

One original (signed and witnessed) copy of this form is required, per application.

I/We consent to the Members of the Milton Committee of Adjustment or a representative of the Committee and/or Town of Milton Staff entering onto and inspecting the subject lands and structures for the limited purpose of evaluating the merits of this application.

I/We have reviewed the fees for applications and the refund policy that forms part of this application form.

I/We hereby further authorize the Town of Milton to release municipal property tax information to the applicant and/or agent named within the attached application, for the specific property location, referenced therein.

I/We _____ of the _____
(Print Name of Owner or Authorized Agent)

_____ in the _____
(e.g. Town of Milton) (e.g. Region of Halton)

being the registered owner(s) of _____
(Municipal Address)

solemnly declare that all the above statements contained in this application are true and I/we 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".

I/We also acknowledge that the information requested on this form is collected under the authority of the *Planning Act*, R.S.O. 1990, Chapter P.13, as amended and the provisions of the Municipal Freedom of Information and Protection of Privacy Act. The information is required in order to process this application and forms part of the public record. Any personal information collected will only be used for the internal processing of this application. Questions about this collection can be made to the Town of Milton's Planning and Development Department.

Note: The signature of the applicant or authorized agency must be witnessed by a Commissioner, etc. A Commissioner is available in the Planning and Development Department, if needed.

Owner's Authorization and Appointment of Agent

Property Owner to Select: Not applicable Agent to be used; authorization/appointment as follows:

I/We hereby authorize _____
(Name of Agent, including Firm Name, if applicable)

to prepare, submit and act on my/our behalf with respect to this consent application.

Declared before me at the _____ of _____
in the _____ of _____
this _____ day of _____ 2 _____

A Commissioner, etc.

Signature of Registered Property Owner
 I have authority to bind the Corporation

Signature of Registered Property Owner
 I have the authority to bind the Corporation



Planning & Public Works
 Tel: 905-825-6000 Fax: 905-825-8822
 Toll Free: 1-866-4HALTON (1-866-442-5866)
www.halton.ca

Environmental Site-Screening Questionnaire

Legal/Municipal Address _____ Applicant: _____

1. Was the subject property ever used for industrial purposes? yes no uncertain
2. Was the subject property ever used for commercial purposes that may have caused contamination (e.g. gasoline station, dry cleaners, etc.) yes no uncertain
3. Has fill ever been placed on the property? yes no uncertain
4. Is there any reason to believe that the subject property is potentially contaminated based on historic use of the property or a neighbouring lot located within 100m of the property? yes no uncertain
5. Are there or were there ever any above-ground or underground storage tanks or waste disposal activities on the property? yes no uncertain
6. For existing or previous buildings on the property, are there building materials that may be potentially hazardous to human health (i.e. asbestos, lead-based paints, etc.)? yes no uncertain
7. For agricultural properties, were pesticides or herbicides ever applied to the property? yes no uncertain
8. Have any of the buildings on the property been heated by fuel oil? yes no uncertain
9. Is the land use changing to a more sensitive land use (e.g. industrial/commercial to residential/institutional)? yes no uncertain
 Note: Daycare uses are defined in O.Reg.153/04 as institutional.

General Information:

1. Have any environmental documents (e.g. Phase I and II Environmental Site Assessments, Records of Site Condition, etc) ever been prepared for the property? If yes, please submit these documents in digital and hardcopy format with your application together with a letter of reliance granting third party reliance on the documents to the Region of Halton. yes no

Certification

I, _____ am the registered owner of the land that is the subject of this document and to the best of my knowledge, the information provided in this questionnaire is true.

Sworn (or declared) and stamped before me _____
 Commissioner of Oaths (Print Name)

in the _____, this _____ day of _____ 20____
 City/Town/Municipality Day Month Year

 Commissioner of Oaths (Signature)

 Registered Owner (Signature)