



## COMMENT REQUEST FORM

**FILE NO.: AN-030/2008**

**ROLL NO.: 3310-402-010-04555**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Building Department  | <input checked="" type="checkbox"/> GIS Section     |
| <input checked="" type="checkbox"/> Building Inspector (Sewage System Review)  | <input checked="" type="checkbox"/> Norfolk Power   |
| <input checked="" type="checkbox"/> Forestry Division  | <input type="checkbox"/> Ministry of Transportation |
| <input checked="" type="checkbox"/> Treasury Department  | <input type="checkbox"/> Railway                    |
| <input checked="" type="checkbox"/> Public Works ➤ NOTE: If an agreement is required please attach the clauses you require in the agreement. | <input type="checkbox"/> Conservation Authority     |

This Committee has received a consent/minor variance application concerning land within your jurisdiction. The proposal is explained on the attached application. If you require further information, please feel free to contact this office. In order to properly consider this application, the Committee of Adjustment requires your comments by:

# JULY 2<sup>nd</sup>, 2008

**APPLICANT:**

466353 Ontario Limited, 21 King Street West, Suite 809, Box 66 Hamilton, ON L8P 4W7

**AGENT:**

R.C. Dixon, O.L.S., 51 Park Road Simcoe, ON N3Y 4J9

**LOCATION:**

Block J Plan 37M-15 (16 Millcroft Drive)

**PROPOSAL:**

TO RECONGNIZE AN EXISTING DEFICIENCY REQUIRING RELIEF OF:

• 0.085 m. (0.28 ft.) from the required exterior side yard of 6 m. (19.68 ft.) to permit an exterior side yard of 5.91 m. (19.4 ft.)

**PLEASE REPLY BY EMAIL DIRECTLY TO:**

**SCOTT PECK, MCIP, RPP**

Norfolk County, 22 Albert Street, Langton, ON N0E 1G0  
(519) 875-4485 ext 1834

**EMAIL: [t.scott.peck@norfolkcounty.ca](mailto:t.scott.peck@norfolkcounty.ca)**

**COMMITTEE OF ADJUSTMENT DECISION:**

If you wish to be notified of the Decision of Norfolk County, Committee of Adjustment in respect of the proposed consent, you must make a written request to:

Karen Judd, ACST (A), Secretary-Treasurer  
P.O. Box 128, 22 Albert Street, Langton ON N0E 1G0  
Phone: (519) 875-4485 ext 1835; Fax: (519) 875-4789  
[karen.judd@norfolkcounty.ca](mailto:karen.judd@norfolkcounty.ca)

**APPEALS TO THE ONTARIO MUNICIPAL BOARD:**

If a person or public body that files an appeal of a Decision of Norfolk County Committee of Adjustment in respect of the proposed consent or variance does not make written submission to the Norfolk County Committee of Adjustment, before it gives or refuses to give a provisional consent or variance, the Ontario Municipal Board may dismiss the appeal.

**NOTE: ANY DEPARTMENT OR AGENCY THAT HAS NOT PROVIDED THEIR COMMENTS BY THE DEADLINE DATE WILL BE CONSIDERED AS HAVING NO COMMENT**

**CIRCULATION DATE: June 18<sup>th</sup>, 2008**

**MINOR VARIANCE**

**Office Use:**

File Number: AN-30/2008  
 Related File: SP-030/2007(2-SP-2001)  
 Fees Submitted: June 9, 2008  
 Application Submitted: June 9, 2008  
 Sign Issued: June 9, 2008  
 Complete Application: June 9, 2008

This development application must be typed or printed in ink and completed in full. An incomplete or improperly prepared application may not be accepted and could result in processing delays.

**Property assessment roll number: 3310- 402-010-045550000**

The undersigned hereby applies to the Committee of Adjustment under Section 45 of the Planning Act, R.S.O. 1990, c. P. 13, for relief as described in this application from by-law no. 1-1999

**A. APPLICANT INFORMATION**

Name of Applicant<sup>1</sup> 460353 Ontario Ltd Phone # (905) 521-1144  
 Address 21 King St. West Box 66 Fax # 528-6328  
 Town / Postal Code Suite 809, Hamilton ON L8P 4A7 E-mail \_\_\_\_\_  
<sup>1</sup> If the applicant is a numbered company provide the name of a principal of the company.

Name of Agent R.C Dixon Phone # (514) 426-0842  
 Address 51 Park Rd Fax # 426-1034  
 Town / Postal Code Simcoe E-mail surveys@amtelecom.net

Name of Owner<sup>2</sup> \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ Fax # \_\_\_\_\_  
 Town / Postal Code \_\_\_\_\_ E-mail \_\_\_\_\_

<sup>2</sup> It is the responsibility of the owner or applicant to notify the Planner of any changes in ownership within 30 days of such a change.

Please specify to whom all communications should be sent<sup>3</sup>:  Applicant  Agent  Owner

<sup>3</sup> Unless otherwise directed, all correspondence, notices, etc., in respect of this development application will be forwarded to the Applicant noted above, except where an Agent is employed, then such will be forwarded to the Applicant and Agent.

Names and addresses of any holders of any mortgages, charges or other encumbrances on the subject lands:

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

MINOR VARIANCE

B. LOCATION/LEGAL DESCRIPTION OF SUBJECT LANDS

Geographic Township	_____	Urban Area or Hamlet	<u>Simcoe</u>
Concession Number	_____	Lot Number(s)	_____
Registered Plan Number	<u>37M-15</u>	Lot(s) or Block Number(s)	<u>Block J.</u>
Reference Plan Number	<u>37R</u>	Part Number(s)	<u>5</u>
Frontage (metres/feet)	<u>12.72m / 41.73</u>	Depth (metres/feet)	<u>37.06m / 121.57</u>
Width (metres/feet)	<u>12.72m / 41.73</u>	Lot area (m <sup>2</sup> / ft <sup>2</sup> or hectares/acres)	<u>469 m<sup>2</sup> / 5047 ft<sup>2</sup></u>
Municipal Civic Address	<u>16 MILLCROFT DRIVE</u>		

Are there any easements or restrictive covenants affecting the subject lands?

Yes  No

If yes, describe the easement or covenant and its effect:

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

C. PURPOSE OF DEVELOPMENT APPLICATION

Please explain what you propose to do on the subject lands/premises which makes this development application necessary (if additional space is required, please attach a separate sheet):

STREET TOWNHOMES - particularly Part 5.

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

Please explain the nature and extent of the amendment requested (assistance is available):

RELIEF FROM EXTERIOR SIDE YARD DEFICIENCY OF  
0.085m / 0.28

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

**MINOR VARIANCE**

Please explain why it is not possible to comply with the provision of the zoning by-law:

building exists.

**D. PROPERTY INFORMATION**

Present official plan designation(s): RESIDENTIAL

Present zoning: R4

Please describe **all existing** buildings or structures on the subject lands and whether they are to be retained, demolished or removed. If retaining the buildings or structures, please describe the type of buildings or structures, and illustrate the setback, in metric units, from front, rear and side lot lines, ground floor area, gross floor area, lot coverage, number of storeys, width, length, height, etc. on your attached sketch which must be included with your application:

5 adjoining townhouse units as on plan.

If known, the date existing buildings or structures were constructed on the subject lands: 2008

If an addition to an existing building is being proposed, please explain what will it be used for (e.g. bedroom, kitchen, bathroom, etc.). If new fixtures are proposed, please describe.

**MINOR VARIANCE**

Please describe **all proposed** buildings or structures/additions on the subject lands. Describe the type of buildings or structures/additions, and illustrate the setback, in metric units, from front, rear and side lot lines, ground floor area, gross floor area, lot coverage, number of storeys, width, length, height, etc. on your attached sketch which must be included with your application:

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If known, the date the proposed buildings or structures will be constructed on the subject lands:

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Are any existing buildings on the subject lands designated under the *Ontario Heritage Act* as being architecturally and/or historically significant?

Yes       No

If yes, identify and provide details of the building:

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The date the subject lands was acquired by the current owner:

*unknown.*

Present use of the subject lands:

*Residential.*

If known, the length of time the existing uses have continued on the subject lands:

*less than a year.*

Existing use of abutting properties:

*residential.*

**E. PREVIOUS USE OF THE PROPERTY**

Has there been an industrial or commercial use on the subject lands or adjacent lands?

Yes       No       Unknown

If yes, specify the uses:

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Has the grading of the subject lands been changed through excavation or the addition of earth or other material?

Yes       No       Unknown

**MINOR VARIANCE**

Has a gas station been located on the subject lands or adjacent lands at any time?

- Yes     No     Unknown

Has there been petroleum or other fuel stored on the subject lands or adjacent lands at any time?

- Yes     No     Unknown

Is there reason to believe the subject lands may have been contaminated by former uses on the site or adjacent sites?

- Yes     No     Unknown

Provide the information you used to determine the answers to the above questions:

\_\_\_\_\_ parcel in subdivision \_\_\_\_\_

If you answered yes to any of the above questions, a previous use inventory showing all known former uses of the subject lands, or if appropriate, the adjacent lands, is needed.

Is the previous use inventory attached?

- Yes     No

**F. STATUS OF OTHER PLANNING DEVELOPMENT APPLICATIONS**

Has the subject land or land within 120 metres of it been or is now the subject of an application under the *Planning Act, R.S.O. 1990, c. P. 13* for:

- (a) a minor variance or a consent;
- (b) an amendment to an official plan, a zoning by-law or a Minister's zoning order; or
- (c) approval of a plan of subdivision or a site plan?

- Yes     No     Unknown    this is a block in subdivision

If yes, indicate the following information about **each application**:

File number: \_\_\_\_\_ SP-030/2007 \_\_\_\_\_

Land it affects: \_\_\_\_\_

Purpose: \_\_\_\_\_

Status/decision: \_\_\_\_\_

**MINOR VARIANCE**

Effect on the requested amendment:

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If additional space is required, please attach a separate sheet.

Is the above information for other planning developments applications attached?

Yes  No

**G. PROVINCIAL POLICY**

Is the requested amendment consistent with the provincial policy statements issued under subsection 3(1) of the *Planning Act, R.S.O. 1990, c. P. 13*?

Yes  No

If no, please explain:

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Are the subject lands within an area of land designated under any provincial plan or plans?

Yes  No

If yes, does the requested amendment conform to or does not conflict with the provincial plan or plans:

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Are any of the following uses or features on the subject lands or within 500 metres (1,640 feet) of the subject lands, unless otherwise specified? Please check the appropriate boxes, if any apply.

Use or Feature	On the Subject Lands		Within 500 Metres (1,640 feet) of Subject Lands (Indicate Distance)	
Livestock facility or stockyard (if yes, complete Form 3 – available upon request)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Wooded area	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Municipal landfill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Sewage treatment plant or waste stabilization plant	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Provincially significant wetland (class 1, 2 or 3) or other environmental feature	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Floodplain	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Rehabilitated mine site	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Non-operating mine site within one kilometre	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Active mine site within one kilometre	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Industrial or commercial use (specify the use(s))	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Active railway line	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Seasonal wetness of lands	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Erosion	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Abandoned gas wells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance

MINOR VARIANCE

H. SERVICING AND ACCESS

Indicate what services are available or proposed:

**Water Supply**

- Municipal piped water
- Communal wells
- Individual wells
- Other (describe below)

**Sewage Treatment**

- Municipal sewers
- Communal system
- Septic tank and tile bed
- Other (describe below)

**Storm Drainage**

- Storm sewers
- Open ditches
- Other (describe below)

If other, describe:

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Have you consulted with Public Works & Environmental Services concerning stormwater management?

- Yes       No

Has the existing drainage on the subject lands been altered?

- Yes       No

Does a legal and adequate outlet for storm drainage exist?

- Yes       No       Unknown

Existing or proposed access to subject lands:

- Unopened road       Provincial highway  
 Municipal road       Other (describe below)

If other, describe:

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Name of road/street:      *MILLCROFT DRIVE*

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**MINOR VARIANCE**

**I. OTHER INFORMATION**

Is there a time limit that affects the processing of this development application?

Yes       No

If yes, describe:

*closing sale pending*

Is there any other information that you think may be useful in the review of this development application? If so, explain below or attach on a separate page.

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Roll Number 3310-402-010-049510000

IMPORTANT: THIS FORM IS NOT COMPLETE UNLESS IT IS ACCOMPANIED BY AN ATTACHED "LOT DIAGRAM PLAN" INDICATING ALL APPLICABLE SITE CONDITIONS.

**Property Information**

Issue Date:

Owner: Sylvester Investments Property Lot:  Former Municipality:   
 Block: J Plan: 37M15  
 Civic Address: 16 Millcroft Part:  Reference Plan:   
 Legal Description:  Concessor:  Extension to a Non-conforming use?   
 Zoning: R4 Current Use of Property: Street Townhomes Township:   
 By-law: 1-1999 Proposed Use of Property: Same

**Zoning Deficiency**

DEVELOPMENT STANDARDS	Required (Meters/Feet)		Proposed		Deficiency	
	Meters	Feet	Meters	Feet	Meters	Feet
a) Lot Area	156m <sup>2</sup>	1678ft <sup>2</sup>	470m <sup>2</sup>	5060ft <sup>2</sup>		
b) Lot Frontage	6.5m	21.32	12.72m	41.73		
c) Front Yard Setback	6m	19.68	8.65	28.40		
d) Exterior Side Yard	6m	19.68	5.91m	19.4	0.085m	0.28
e) Interior Side Yard (Rt)	0	0				
f) Interior Side Yard (Lt)	—	—		3		
g) Rear Yard	7.5m	24.6	10.32	33.87		
h) Dwelling Unit Area						
i) % Lot Coverage						
j) Height of Building						
k) Accessory Building						
Accessory Building Comment:	<input type="text"/>					
l) Parking						
m) Other						
Other Clause:	<input type="text"/>		Other Description: <input type="text"/>			
	<input type="text"/>		<input type="text"/>			
	<input type="text"/>		<input type="text"/>			
	<input type="text"/>		<input type="text"/>			
	<input type="text"/>		<input type="text"/>			

The "PROPOSED" information and any supporting documents have been provided by the owner/applicant. The above information is only in respect to "Zoning" (Minor Variance, Zone Change, etc.) and does not relieve the applicant/owner from obtaining all other permits and/or approvals, such as Health Approval, entrance Permits, Building Permit, etc.

I, the Owner/Applicant take full responsibility for the accuracy of the "PROPOSED" information provided on this form.

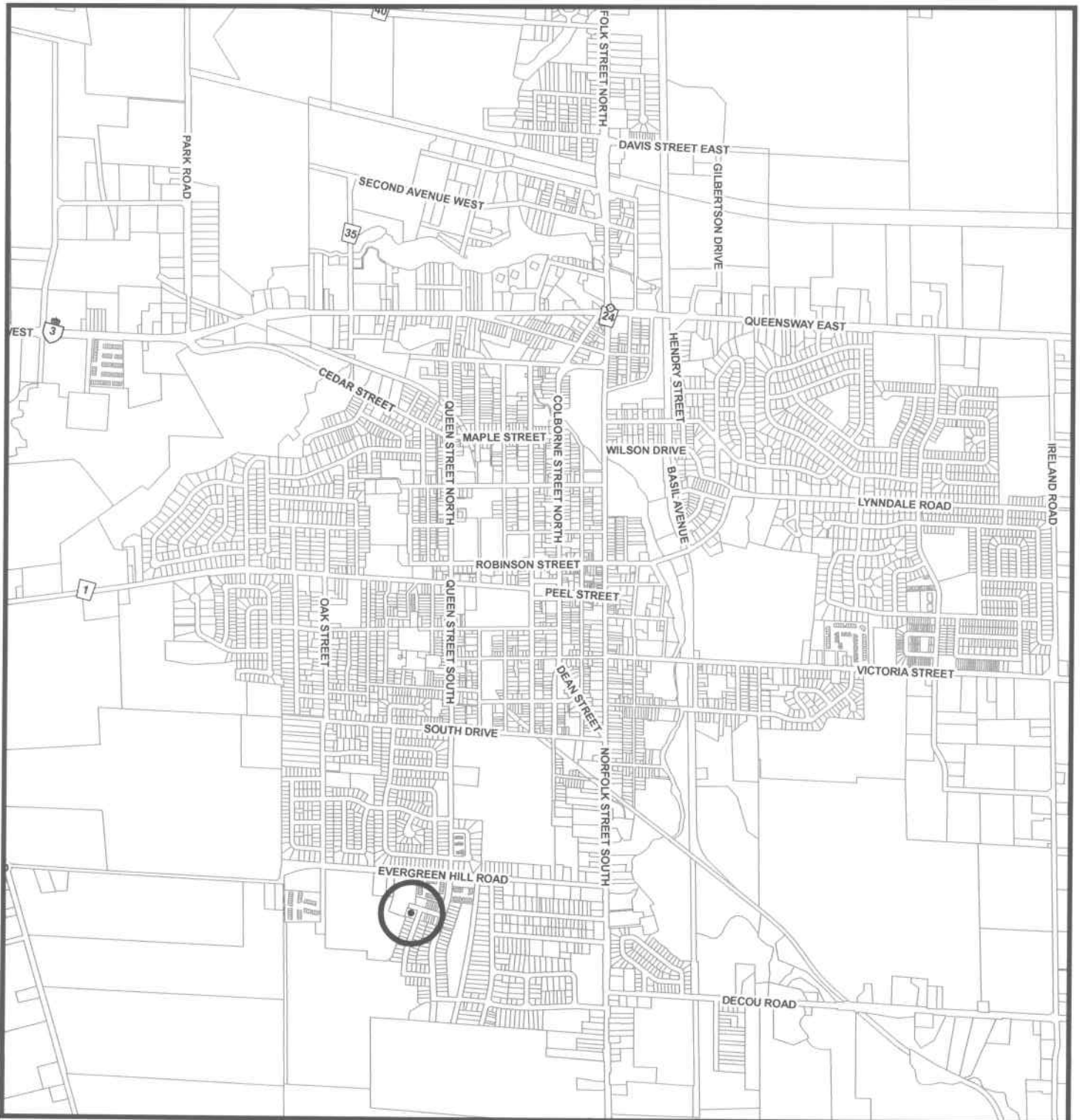
Signatures: [Signature]  
 Owner/Applicant

[Signature]  
 Building Inspector

# MAP 1

File Number: AN-030/2008

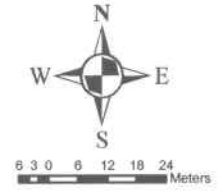
## Geographic Township of WOODHOUSE



# MAP 2

File Number: AN-030/2008

Geographic Township of WOODHOUSE



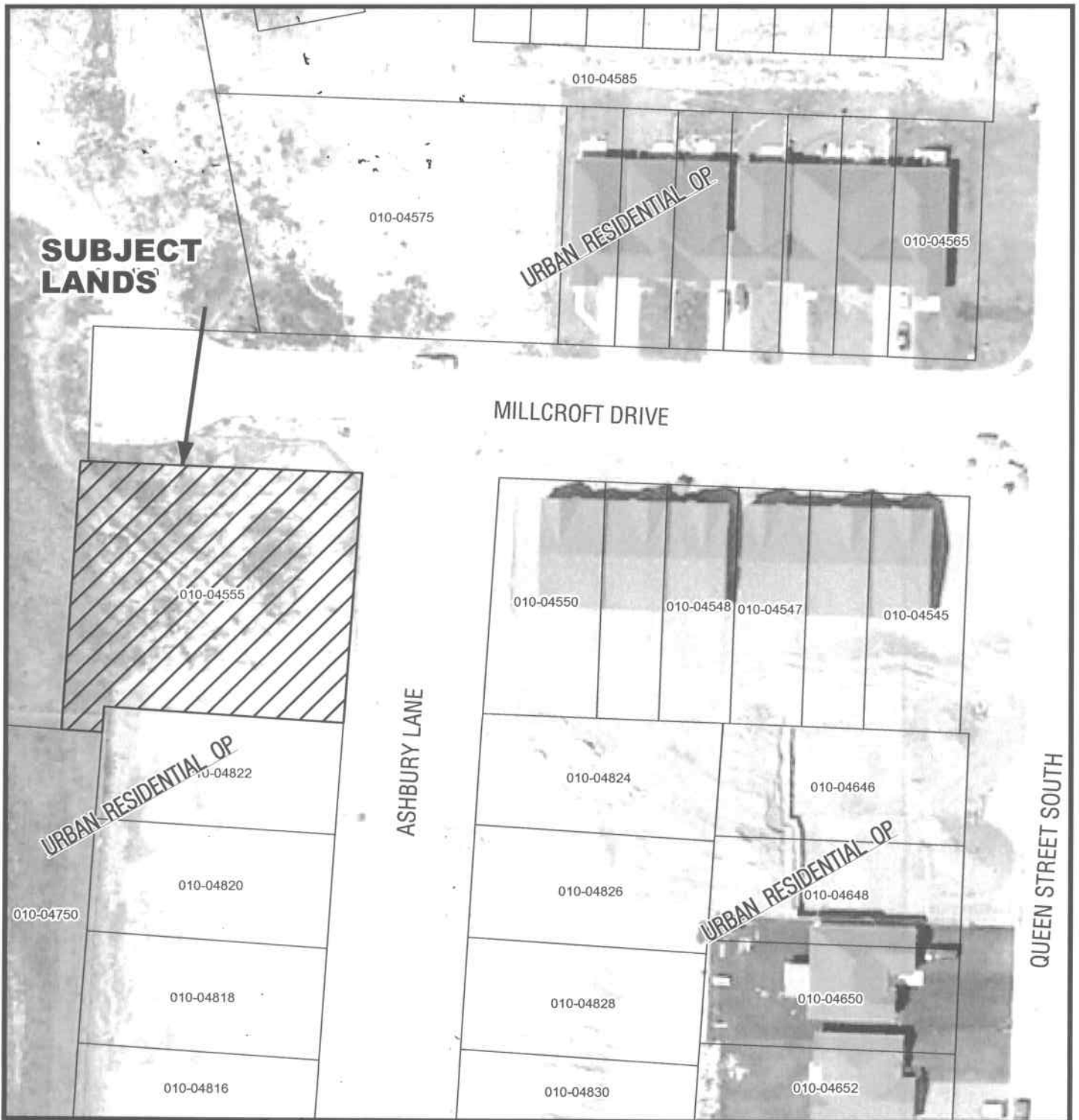
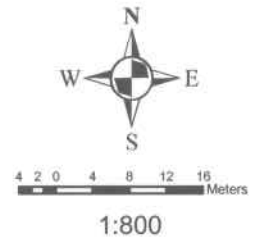
1:1,500



# MAP 3

File Number: AN-030/2008

Geographic Township of WOODHOUSE



# MAP 4

File Number: AN-030/2008

Geographic Township of WOODHOUSE

