

File Number ANPL201607
 Related File Number _____
 Pre-consultation Meeting On MAR 10/16
 Application Submitted On MAR 10/16
 Complete Application On MAR 10/16

Application Fee \$0.77
 Conservation Authority Fee N/A
 OSSD Form Provided N/A
 Sign Issued _____

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: 3310-544 00207800

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. 12 2014

A. APPLICANT INFORMATION

Name of Applicant¹ JEFF BOUCK Phone # 519-865-3030
 Address 1125 COLBORNE ST E Fax # _____
 Town / Postal Code BRAINTFORD N3T 5L5 E-mail jeff@bouckinc.com

¹ If the applicant is a numbered company provide the name of a principal of the company.

Name of Agent _____ Phone # _____
 Address _____ Fax # _____
 Town / Postal Code _____ E-mail _____

Name of Owner² B.B. INVESTMENTS Phone # _____
 Address SAME Fax # _____
 Town / Postal Code _____ E-mail _____

² 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 sent³: Applicant Agent Owner

³ 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 mortgagees, charges or other encumbrances on the subject lands:

B. LOCATION/LEGAL DESCRIPTION OF SUBJECT LANDS

Geographic Township	<u>SOUTH WALSINGHAM</u>	Urban Area or Hamlet	<u>Port Rowan</u>
Concession Number			
Registered Plan Number			
Reference Plan Number			
Frontage (metres/feet)	<u>99 FEET - 30.2m</u>		<u>165' - 50.3m</u>
Width (metres/feet)	<u>99' - 30.2m</u>		<u>.4 ACRES</u>
Municipal Civic Address	<u>1048 BAY ST.</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):

TO ENCLOSE A COVERED PORCH (WAS EXISTING)
TO MAKE A STORAGE AREA

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

Requesting relief of 5.31m from section 6.1.2(d)
to permit a rear yard setback of 0.69 m.

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

WAS EXISTING COVERED PORCH

D. PROPERTY INFORMATION

Present official plan designation(s):

CENTRAL BUSINESS DISTRICT

Present zoning:

Is there a site specific zone on the subject lands?

No

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:

SEE ATTACHED MAP

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

AT LEAST 80 YEARS

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.

CLOSED IN PORCH FOR
STORAGE

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:

SAME

MINOR VARIANCE

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

ALREADY EXISTING

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:

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

Present use of the subject lands:

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

Existing use of abutting properties:

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:

WAS A LODGE NOLAN BAKERY, LCBO NEXT DOOR

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

Yes No Unknown

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

MINOR VARIANCE

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

PERSONAL KNOWLEDGE

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:

1. a minor variance or a consent;
2. an amendment to an official plan, a zoning by-law or a Minister's zoning order; or
3. approval of a plan of subdivision or a site plan?

Yes No Unknown

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

File number:

Land it affects:

Purpose:

Status/decision:

Effect on the requested amendment:

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

MINOR VARIANCE

If no, please explain:

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:

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 20M 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

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:

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

Yes No



MINOR VARIANCE

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:

Name of road/street:

BAY ST.

I. OTHER INFORMATION

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

Yes No

If yes, describe:

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.

NO

Building and By-Law Division
 Simcoe: 185 Robinson Street
 Suite 200
 Simcoe, ON
 N3Y 5L6
 519-426-4377
 Langton: 22 Albert Street
 Langton, ON
 N0E 1G0
 519-875-4485



ZONING DEFICIENCY PRZDF20160300

PROPERTY INFORMATION

STREET # 1048

ROLL No. 3310544002078000000

LEGAL DESCRIPTION:
 PRWN PLAN 16B BLK 29 LOT 16,
 REG, 16335.00SF 99.00FR 165.00D, ,

UNIT #

TOWNSHIP Norfolk - Port Rowan

STREET NAME Bay St. Port Rowan

ZONING CBD

ZONING DEFICIENCY

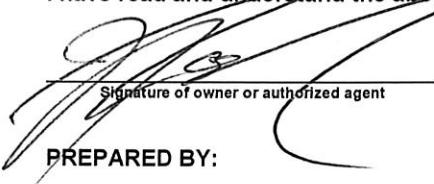
DEVELOPMENT STANDARD	REQUIRED (m/ft)	PROPOSED (m/ft)	DEFICIENCY (m/ft)
LOT AREA			
LOT FRONTAGE			
FRONT YARD SETBACK			
EXTERIOR SIDE YARD			
INTERIOR SIDE YARD (RIGHT)			
INTERIOR SIDE YARD (LEFT)			
REAR YARD SETBACK	6.00 M	19.69	0.69
DWELLING UNIT AREA			2.25
% LOT COVERAGE	80%		25%
BUILDING HEIGHT			--
ACCESSORY BUILDING			
ACCESSORY BUILDING COMMENTS			
PARKING SPACES			

ADDITIONAL COMMENTS:

Rear yard abuts a R2 zone

The proposed information and any supporting documents have been provided by the owner/applicant. The above information is only in respect to the associated planning application and does not relieve the owner/applicant from obtaining all other permits/approvals required. The owner/applicant hereby accepts full responsibility for the accuracy of the proposed information provided on this form.

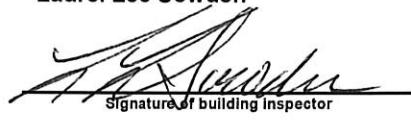
I have read and understand the above:


 Signature of owner or authorized agent


 Mar 16/16
 Date

PREPARED BY:

Laurel Lee Sowden


 Signature of building inspector

AS PER:

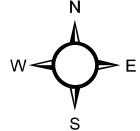

 Mar 10/16
 Date

Fritz R. Enzlin CBCO, CRBO
 Chief Building Official
 Manager, Building & Bylaw Division
 Norfolk County

MAP 1

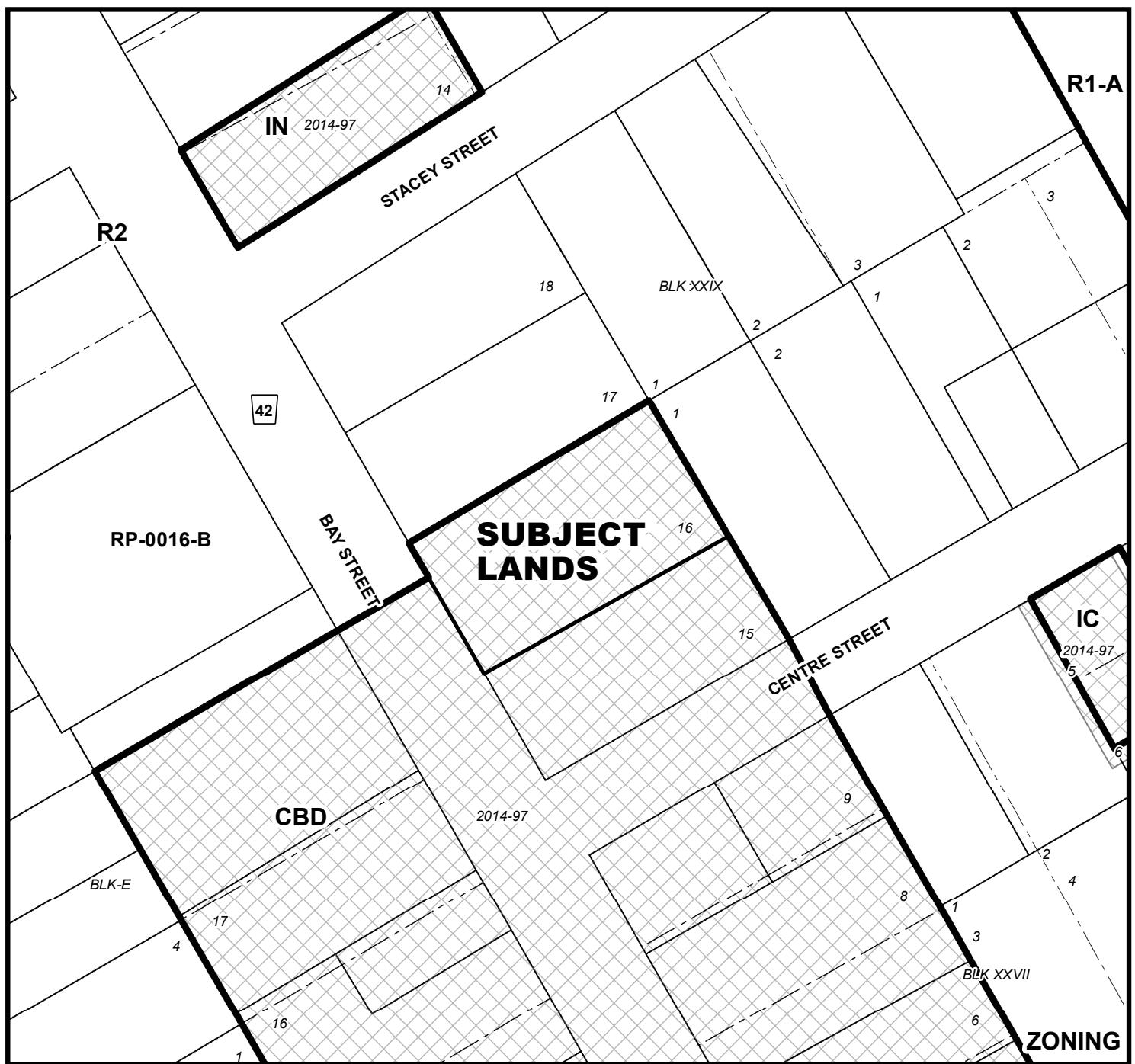
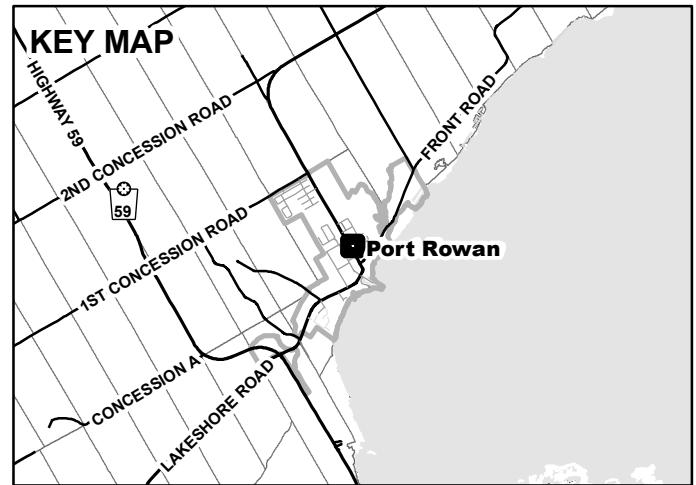
File Number: ANPL2016067

Urban Area of
PORT ROWAN



1:1,000

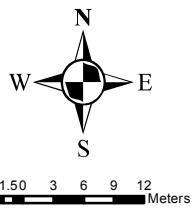
8 4 0 8 16 24 32 Meters



MAP 2

File Number: ANPL2016067

Urban Area of PORT ROWAN

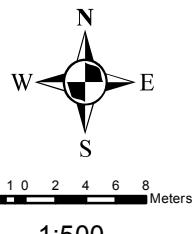


1:750

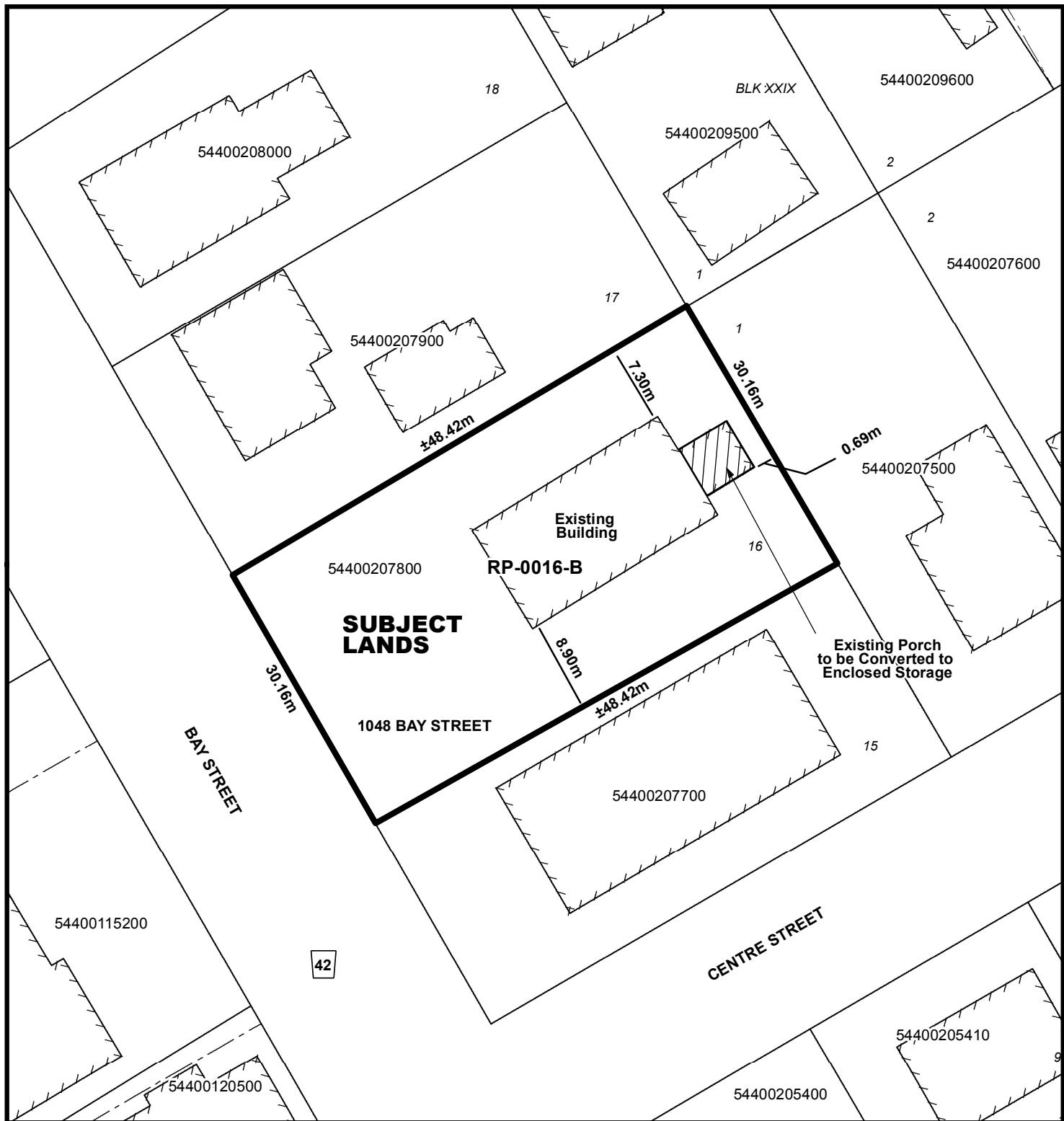


MAP 3

File Number: ANPL2016067
Urban Area of PORT ROWAN



1:500



LOCATION OF LANDS AFFECTED

File Number: ANPL2016067

Urban Area of PORT ROWAN

