

CONSENT / SEVERANCE

File Number	<u>BNPL2014193</u>	Application Fee	<u>✓</u>
Related File Number	<u>—</u>	Conservation Authority Fee	<u>✓</u>
Pre-consultation Meeting On	<u>Oct 7 / 2014</u>	OSSD Form Provided	<u>✓</u>
Application Submitted On	<u>" "</u>	Sign Issued	<u>—</u>
Complete Application On	<u>Oct. 8 2014</u>		

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: 3310-543-010-01000-0000

- | | |
|--|--|
| <input type="checkbox"/> Creation of a new lot | <input type="checkbox"/> Boundary adjustment |
| <input checked="" type="checkbox"/> Surplus Dwelling | <input type="checkbox"/> Easement |
| <input type="checkbox"/> Farm Split (form to be completed) | <input type="checkbox"/> Right-of-way |
| <input type="checkbox"/> Other (lease / charge) | |

A. APPLICANT INFORMATION

Name of Applicant	<u>The Nature Conservancy of Canada</u>	Phone #	<u>519 886 7773</u>
Address	<u>PO Box 443</u>	Fax #	<u>519 886 9777</u>
Town / Postal Code	<u>London, ON N6A 4W1</u>	E-mail	<u>/</u>

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

AGENT INFORMATION

Name of Agent	<u>KRISTEN BERNARD</u>	Phone #	<u>519 886 7773 x206</u>
Address	<u>PO Box 520</u>	Fax #	<u>519 886 9777</u>
Town / Postal Code	<u>PORT ROWAN, ON N0E 1M0</u>	E-mail	<u>kristen.bernard@natureconservancy.ca</u>

OWNER(S) INFORMATION Please indicate name(s) exactly as shown on the Transfer/Deed of Land

Name of Owners ²	<u>The Nature Conservancy of Canada</u>	Phone #	<u>519 886 7773</u>
Address	<u>PO Box 443</u>	Fax #	<u>519 886 9777</u>
Town / Postal Code	<u>London, ON N6A 4W1</u>	E-mail	<u>/</u>

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 sent ³: ☐ 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	
Concession Number	<u>6th Concession</u>	Lot Number(s)	<u>Pt lot 5</u>
Registered Plan Number		Lot(s) or Block Number(s)	
Reference Plan Number		Part Number(s)	
Frontage (metres/feet)	<u>520 metres</u>	Depth (metres/feet)	<u>1080 metres (irregular)</u>
Width (metres/feet)	<u>1019 metres</u>	Lot area (m ² / ft ² or hectares/acres)	<u>99.93 acres</u>
Municipal Civic Address	<u>344 NORTH WALSHINGHAM - SOUTH WALSHINGHAM TOWNLINE ROAD.</u>		

For questions regarding requirements for a municipal civic address please contact NorfolkGIS@norfolkcounty.ca.

To obtain your municipal civic address for the severed lands please contact your local building inspector.

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 SEVER A SURPLUS DWELLING AS A RESULT OF
FARM AMALGAMATION.

Name of person(s), if known, to whom lands or interest in lands is to be transferred, leased or charged (if known):

UNKNOWN

If a boundary adjustment, identify the **assessment roll number** and **property owner** of the lands to which the parcel will be added:

N/A

CONSENT / SEVERANCE

If the application involves the severance of a surplus farmhouse (through farm amalgamation), please list all properties in Norfolk County, which are owned and farmed by the applicant and involved in the farm operation:

Owners Name and Address (including those with part interest) Assessment Roll No. (obtained from your tax bill)	Geographic Township Concession and Lot #	Total Acreage (individual property)	Acres Workable (individual property)	Existing Farm Type (individual property e.g. corn production, orchard, tobacco)	Dwelling Present	Year Dwelling Built
SUBJECT LANDS	SOUTH WALSHINGHAM 99.93 ac 00 ac	99.93 ac	00 ac	NATIVE seed production forestry	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1978
OTHER	SEE ATTACHED LIST				<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	

If the application proposes to divide a farm into two smaller agricultural parcels, please complete the following:

Description of Land	Lands to be Severed	Lands to be Retained
Area under cultivation	(m ² / ft ² or hectares/acres)	(m ² / ft ² or hectares/acres)
Woodlot area	(m ² / ft ² or hectares/acres)	(m ² / ft ² or hectares/acres)
Existing crops grown (type and area)		
Proposed crops grown (type and area)		

Description of Existing Buildings	Lands to be Severed	Lands to be Retained
Residence	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Livestock barn	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of livestock		
Capacity of barn		
Manure storage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of manure storage		

Description of land intended to be SEVERED:

Frontage (metres/feet)	55.07 metres	Depth (metres/feet)	85 metres (irregular)
Width (metres/feet)	48.8 metres (irregular)	Lot area (m ² / ft ² or hectares/acres)	1 acre
		PROPOSED FINAL LOT SIZE (if boundary adjustment)	1

Existing use: RESIDENTIAL

Proposed use: RESIDENTIAL



CONSENT / SEVERANCE

Number and type of buildings and structures **EXISTING** on the land to be severed, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

SEE ATTACHED SKETCH.

Number and type of buildings and structures **PROPOSED** on the land to be severed, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

NONE

Description of land intended to be **RETAINED**:

Frontage (metres/feet)

470.93 metres (irregular).

Depth (metres/feet)

680 ~~metres~~ metres

Width (metres/feet)

619 metres

Lot area (m² / ft² or hectares/acres)

98.93 acres

Existing use:

NATIVE SEED PRODUCTION; FORESTRY

Proposed use:

NATIVE SEED PRODUCTION; FORESTRY.

Number and type of buildings and structures **EXISTING** on the land to be retained, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

SEE ATTACHED; OLD BARN TO BE REMOVED.

Number and type of buildings and structures **PROPOSED** on the land to be retained, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

NONE

Description of proposed **RIGHT OF WAY/EASEMENT**:

Frontage (metres/feet)

Depth (metres/feet)

Width (metres/feet)

Lot area (m² / ft²)

Proposed use:

D. PROPERTY INFORMATION

Present official plan designation(s):

AGRICULTURAL

Present zoning:

AGRICULTURAL.

Is there a site specific zone on the subject lands?

N/A.

CONSENT / SEVERANCE

Has the owner previously severed any lands from this subject land holding or any other lands the owner has interest in since August 24, 1978?

☐ Yes ☒ No ☐ Unknown

If yes, indicate the file number and the status/decision: _____

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

☐ Yes ☒ No ☐ Unknown

If yes, indicate the file number and the status/decision: _____

Number of separate parcels that have been created: _____

Date(s) these parcels were created: _____

Name of the transferee for each parcel: _____

Uses of the severed lands: _____

If this application proposes to sever a dwelling made surplus through farm amalgamation, when were the farm properties amalgamated?

NCC BEGAN ACTIVELY FARMING IN SPRING 2012 IN NORFOLK COUNTY & RECEIVED A FARM BUSINESS REGISTRATION NUMBER IN APRIL 2013. 1978

Date of construction of the dwelling proposed to be severed: _____

Date of purchase of subject lands: 16 APRIL 2007 (HELD IN TRUST BY LAWYER GEORGE MACINTOSH UNTIL 26 JUNE 2013 WHEN TRANSFERRED TO NCC).

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: _____

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



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

TITLE SEARCH AS PART OF PROPERTY PURCHASE; SITE VISIT

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

File number: _____

Land it affects: _____

Purpose: _____

Status/decision: _____

Effect on the requested amendment: _____

Is the above information for other planning developments applications attached? ☐ Yes ☐ No

G. PROVINCIAL POLICY

Is the requested application 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:

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

☐ Yes ☒ No

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

CONSENT / SEVERANCE

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 MDS 1 Calculation Form)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No _____ distance
Wooded area	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input 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 checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <u>150m</u> distance
Floodplain	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No _____ distance
Erosion	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input 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

WATER SUPPLY

SEVERED

RETAINED

Municipal piped water

☐
☐

Communal Wells

☐
☐

Individual Wells

☒
☐

Other means (describe) _____

SEWAGE TREATMENT

SEVERED

RETAINED

Municipal Sewers

☐
☐

Communal System

☐
☐

Septic tank and tile bed

☒
☐

Other means (describe) _____

STORM DRAINAGE

SEVERED

RETAINED

Storm Sewers

☐
☐

Open ditches

☐
☐

Other (describe) _____



CONSENT / SEVERANCE

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 the **RETAINED** lands:

☐ Unopened road

☒ Municipal road maintained all year

☐ Municipal road maintained seasonally

☐ Provincial highway

☐ Right-of-way

☐ Other (describe below)

If other, describe: _____

Name of road/street: NORTH WALSINGHAM - SOUTH WALSINGHAM TOWNLINER ROAD.

Existing or proposed access to SEVERED lands:

☐ Unopened road

☒ Municipal road maintained all year

☐ Municipal road maintained seasonally

☐ Provincial highway

☐ Right-of-way

☐ Other (describe below)

If other, describe: _____

Name of road/street: NORTH WALSINGHAM - SOUTH WALSINGHAM TOWNLINER ROAD.

I. OTHER INFORMATION

Is there a time limit that affects the processing of this development application? ☐ Yes ☒ No

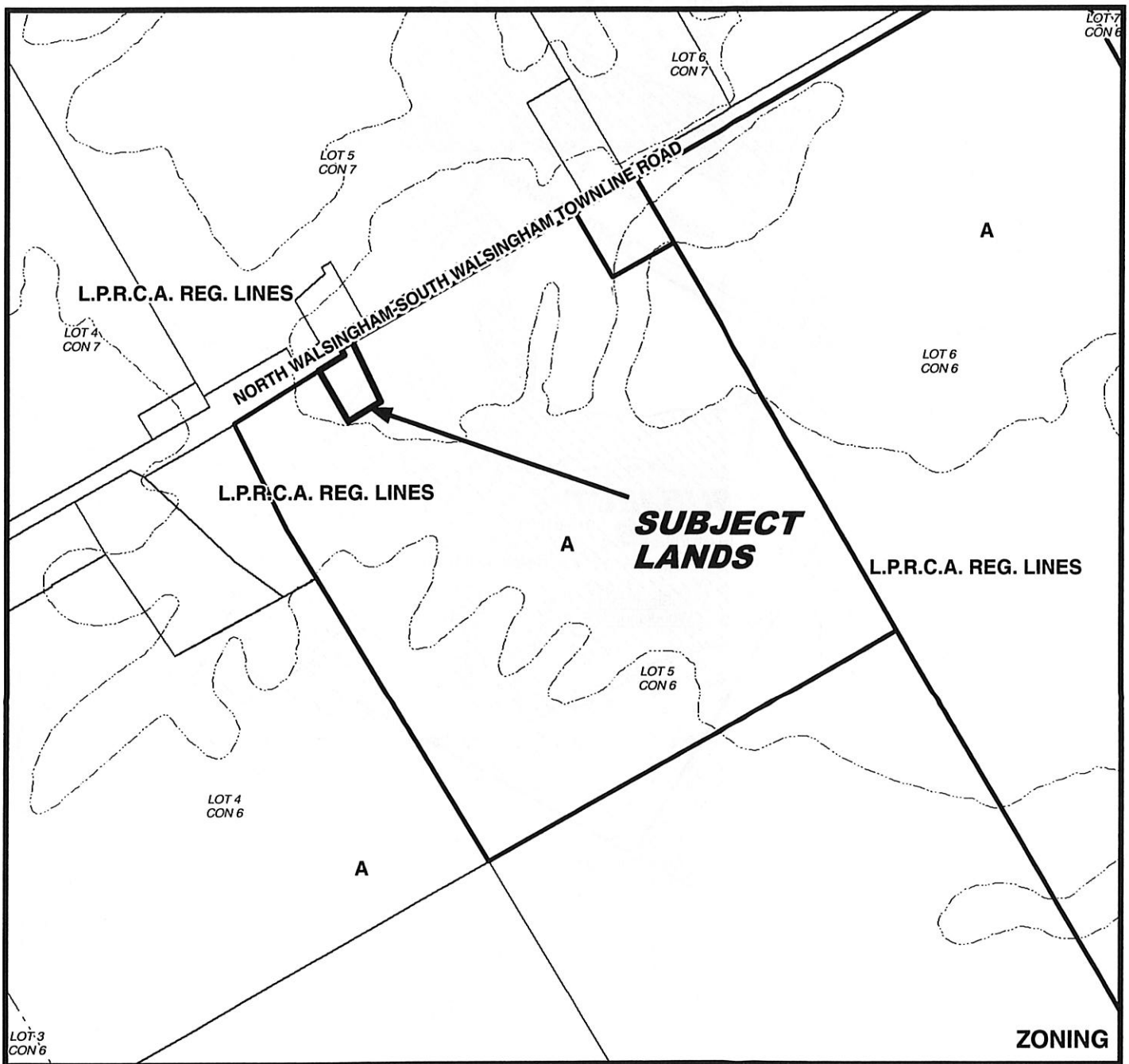
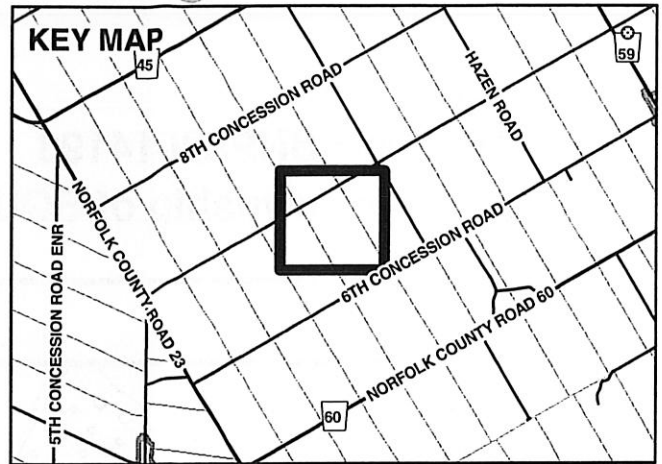
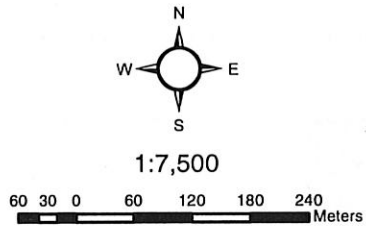
If yes, describe: _____

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.

PLEASE SEE ATTACHED.

MAP 1
File Number: BNPL2014193

Geographic Township of
SOUTH WALSINGHAM



MAP 2

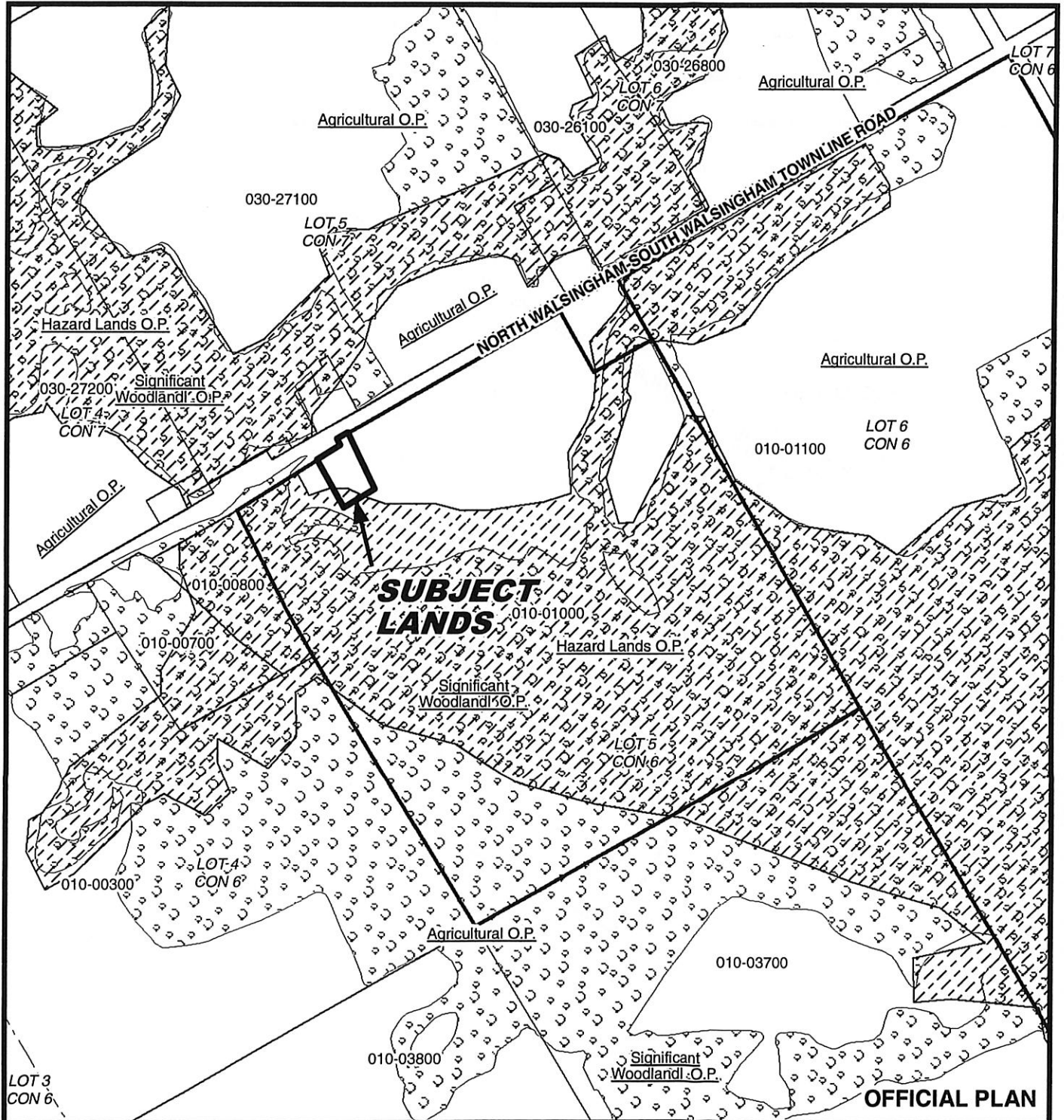
File Number: BNPL2014193

Geographic Township of SOUTH WALSHINGHAM



30 15 0 30 60 90 120
Meters

1:7,500



10/10/2014

MAP 3

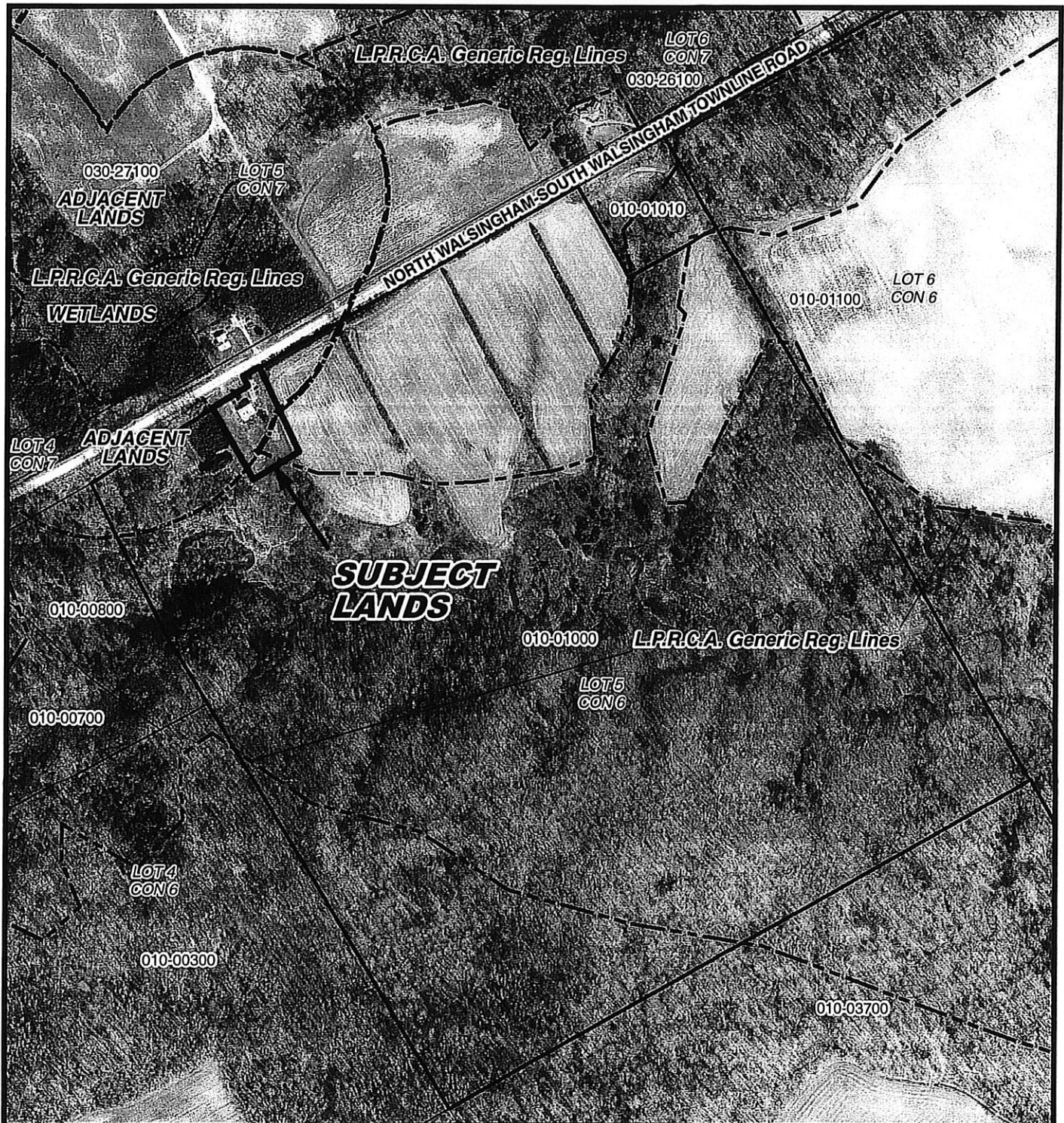
File Number: BNPL2014193

Geographic Township of SOUTH WALSINGHAM



20 40 60 80 Meters

1:5,000



MAP 4

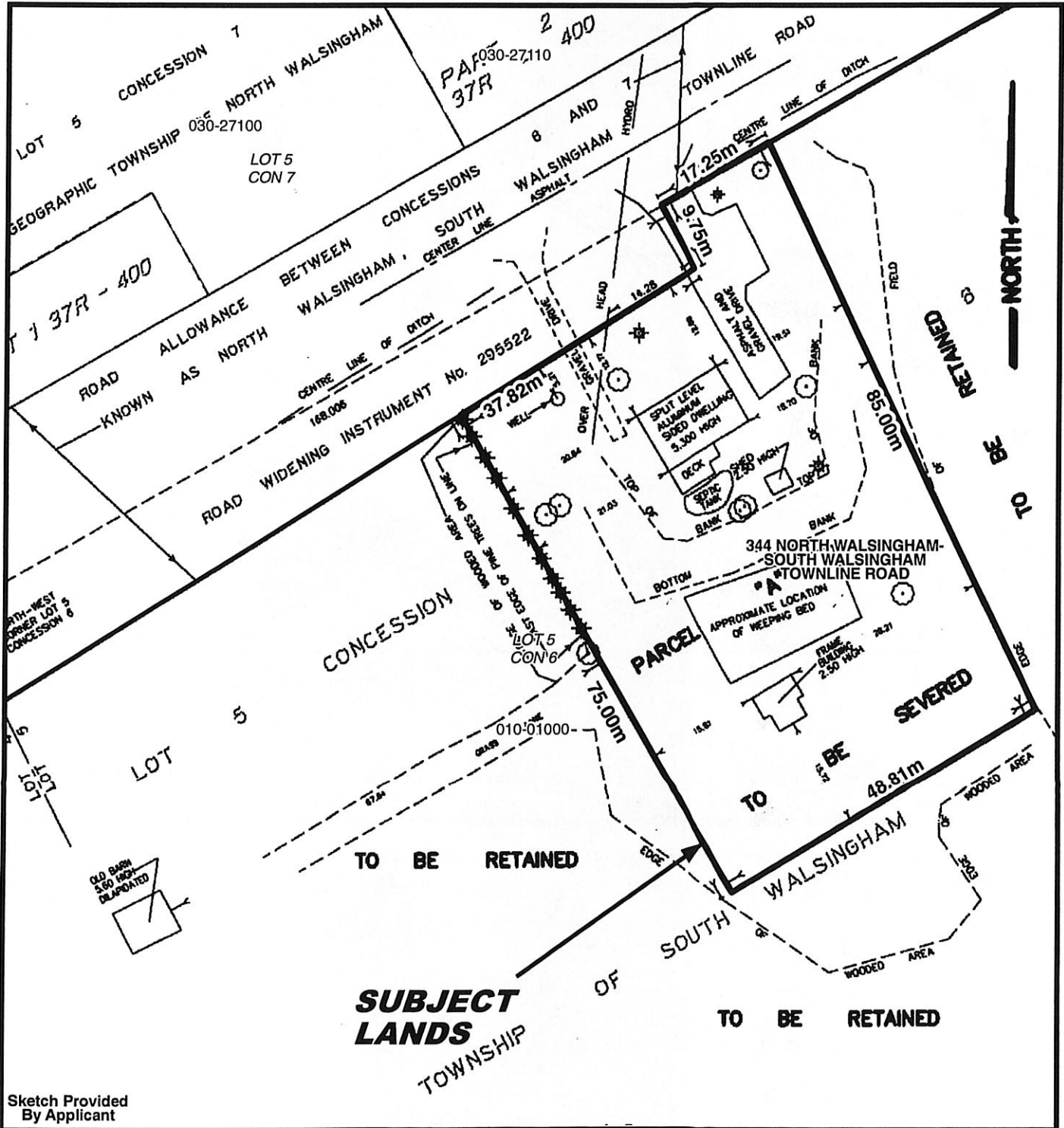
File Number: BNPL2014193

Geographic Township of SOUTH WALSINGHAM



31.50 3 6 9 12 Meters

1:750



Sketch Provided
By Applicant

10/10/2014


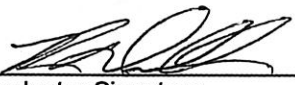


Working together with our community
to provide quality services.

Evaluation Form for Existing On-Site Sewage Systems

Date: July 2009

OFFICE USE ONLY		FILE No.:		DATE RECEIVED:	
PROPERTY INFORMATION		Municipal Address: 344 7 th CONCESSION RD. - NORTH WALS. SOUTH WALS. TOWNLINE R1			
Owner: The Nature Conservancy of Canada -		Lot: Pt Lot 5		Concession: 6	
Lot Area: 1 Acre		Lot Frontage: 55.07 m		Assessment Roll No. 3310 543 010 01000 0000	
PURPOSE OF EVALUATION		<input checked="" type="checkbox"/> Consent <input type="checkbox"/> Minor Variance <input type="checkbox"/> Site Plan <input type="checkbox"/> Zoning <input type="checkbox"/> Other _____			
BUILDING INFORMATION		<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural			
Building Area: 1600 SF.		No. of Bedrooms: 3		No. of Fixture Units: 14	
		Is the building currently occupied? <input checked="" type="checkbox"/> Yes / No If No, how long?			
EVALUATOR'S INFORMATION		Evaluator's Name: Richard Millen		Company Name: MILLEN CONSTRUCTION	
Address: 50 BENSON RD. CLEAR CREEK		Postal Code: N0E 1C0		Phone: 519 403 8590	
Email: millenrichard@rogers.com		BCIN #		40518	
SITE EVALUATION		Ground Cover (trees, bushes, grass, impermeable surface): GRASS		Soil Type: SAND	
Site Slope: <input type="checkbox"/> Flat <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Steep		Soil Conditions: <input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry		Depth of Water Table: 7 ft.	
Surface Discharge Observed: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Odour Detected: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Current Weather (at time of evaluation): OVERCAST 13°C	
SYSTEM EVALUATION		Class of System: <input type="checkbox"/> 1 (Privy) <input type="checkbox"/> 2 (Greywater) <input type="checkbox"/> 3 (Cesspool) <input checked="" type="checkbox"/> 4 (Leaching Bed) <input type="checkbox"/> 5 (Holding Tank)			
Tank: <input checked="" type="checkbox"/> Pre-cast <input type="checkbox"/> Plastic <input type="checkbox"/> Fibre Glass <input type="checkbox"/> Wood <input type="checkbox"/> Other _____		Size: 800 Gal.		Pump: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Distribution System: Area: <input type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium		No. of Tile Runs: 5		Total Length of Tile: 250'	
				Distance Between Tile Runs: 6'-0"	
Tile Material: <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Clay <input type="checkbox"/> Other		Ends: <input checked="" type="checkbox"/> Capped <input type="checkbox"/> Joined		Cover: <input type="checkbox"/> Filter Cloth <input type="checkbox"/> Sand <input checked="" type="checkbox"/> Top Soil <input checked="" type="checkbox"/> Seeded	
Setbacks:		Tank		Distribution Pipe	
Distance to Buildings & Structures (ft)		5'-0"		75' (HOUSE)	
Distance to Bodies of Water (ft)		OVER 100'		OVER 100'	
Distance to Nearest Well (ft)		80'-0" +		130'-0	
Distance to Proposed Property Lines		Front 110 Rear 140 Side 90 Side 70		Front 190 Rear 27 Side 100 Side 50	

OVERALL SYSTEM RATING	<input checked="" type="checkbox"/> System Working Properly / No Work Required <input type="checkbox"/> System Functioning / Maintenance Required <input type="checkbox"/> System Not Functioning / Minor Repair Required <input type="checkbox"/> System Failure/Major Repair / Replacement Required <p><u>Note:</u> Any repair/replacement of an on site sewage system requires a building permit. Contact the Norfolk County Building Division at (519) 426-4377 for more information.</p> <p><u>Additional Comments:</u> AT TIME OF EVALUATION, SYSTEM IN GOOD WORKING ORDER.</p>
VERIFICATION	<p>OWNER: The owner is responsible for having a site evaluation conducted of the above mentioned property. Neither the evaluation nor the approval thereof shall in any way exempt the owner(s) from complying with the Ontario Building Code or any other applicable law.</p> <p>I, <u>MICHAEL BRADSTREET - THE NATURE CONSERVANCY OF CANADA</u> (the owner of the subject property) hereby authorize the above mentioned evaluator to act on my behalf with respect to all matters pertaining to the existing on-site sewage system evaluation.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">  Owner Signature </div> <div style="width: 45%;"> <u>22 Sept 2014</u> Date </div> </div>
<p>EVALUATOR:</p> <p>1. I, <u>RICHARD NELLEN</u> declare that this site evaluation is accurate as of the date of inspection. No determination of future performance can be made due to unknown conditions, future water usage over the life of the system, abuse of the system and/or inadequate maintenance, all of which may adversely affect the life of the system. This evaluation does not grant or imply any guarantee or warranty of the future performance of the sewage system. The undersigned takes no responsibility for the accuracy of existing or proposed property lines, whether measured or implied.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">  Evaluator Signature </div> <div style="width: 45%;"> <u>Sept. 22/14</u> Date </div> </div>	
<p>BUILDING DIVISION COMMENTS</p> <p>Comments: _____</p> <p>_____</p> <p>I, _____ have reviewed the information contained in this form as submitted.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> _____ Chief Building Official or designate </div> <div style="width: 45%;"> _____ Date </div> </div>	

Revised: March 24, 2012



On Site Sewage Disposal System Location Plan

DATE: SEPT 22 / 14.

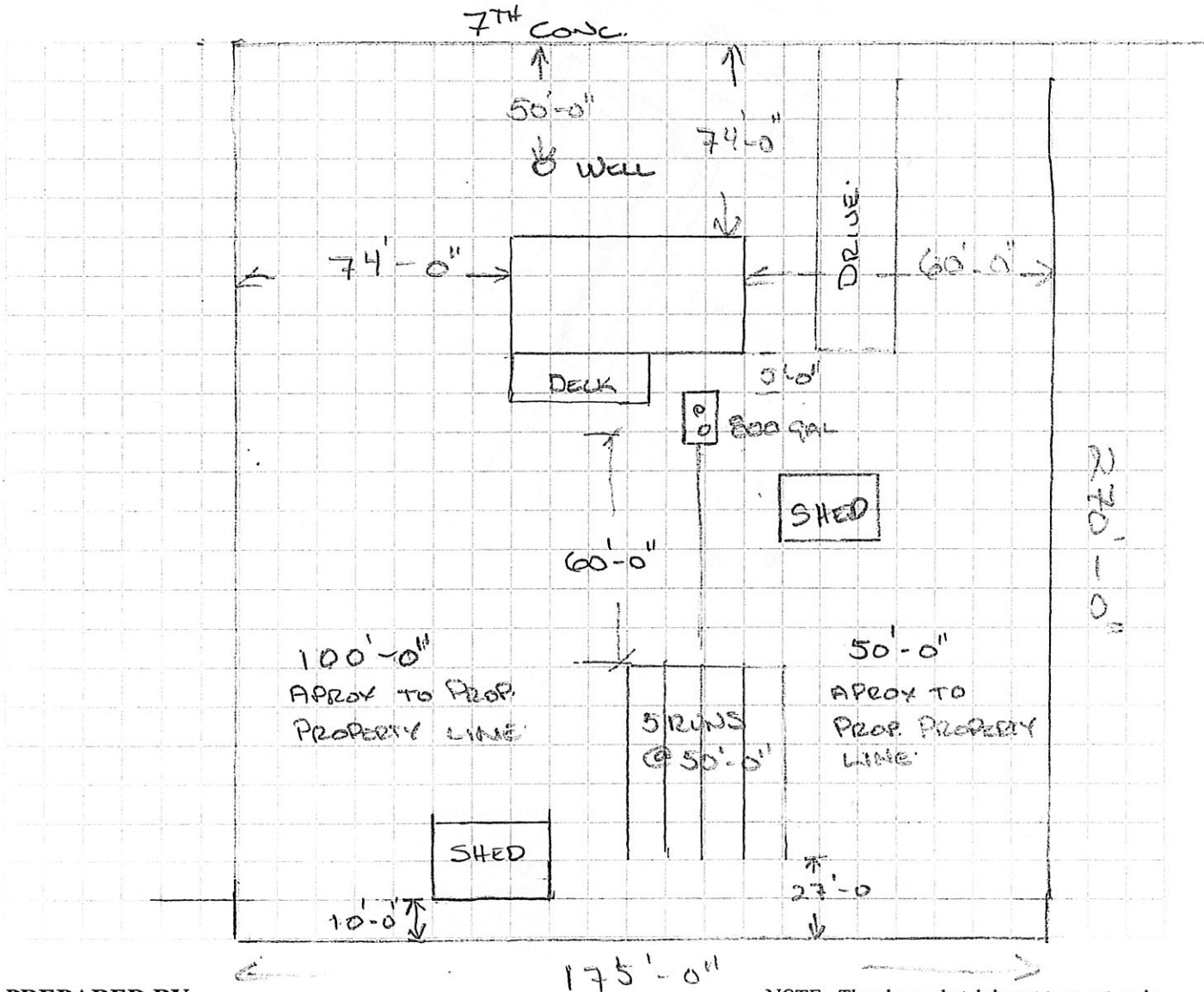
APPLICATION NUMBER: _____

OWNER THE NATURE CONSERVANCY OF CANADA.

EVALUATOR R. Miller.

PROPERTY ADDRESS 344 7th CONCESSION.

Please provide a DIMENSIONED sketch drawing indicating EXISTING AND PROPOSED property lines, existing roads and driveways, location of all existing buildings, location of existing wells, and location of existing septic tanks and tile beds.



PREPARED BY: _____

NOTE: The above sketch is not to exact scale.



**AREA OF TO BE SEVERED = 4045.7 SQUARE METRES
(1.0 ACRES)**

KIM HUSTED SURVEYING LTD.
ONTARIO LAND SURVEYOR
 30 HARVEY STREET, TILLSBURG ONTARIO, N4G 3J8
 PHONE: 519-842-3638 FAX: 519-842-3638

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