



7490 Sideroad 7 W, PO Box 125,  
Kenilworth, ON N0G 2E0  
[www.wellington-north.com](http://www.wellington-north.com)

# APPLICATION FOR A MINOR VARIANCE

519.848.3620  
1.866.848.3620 FAX 519.848.3228



## GUIDELINES

### **Introduction:**

The submission of an application to the municipality to seek relief from a municipal Zoning By-law is provided for under Section 45 of The Planning Act, R.S.O. 1990, as amended. As such, this form must be completed and accompanied with the required fee prior to consideration by Council or a Committee of Adjustment. The purpose of these Guidelines is to assist persons in completing the Minor Variance Application. Should you require clarification on any matter covered by this application form, please contact the Municipal Office at the address at the bottom of the page.

### **Application Fees:**

Each application must be accompanied by the application fee in the form of a cheque/cash/money order payable to the Township of Wellington North. This fee is used to pay all legal, planning and other associated costs with respect to the processing of the subject application.

### **Authorization:**

If the applicant (agent or solicitor) is not the owner of the subject land, a written statement by the owner must accompany the application which authorizes the applicant to act on behalf of the owner as it relates to the subject application (See Section G).

### **Drawing:**

All applications for a Minor Variance must include an **accurate and to scale** sketch showing the dimensions of the subject land and all of the abutting land showing the location, size and type of all buildings and structures on the subject land and abutting land. In some cases, it may be preferable that this plan be prepared by a qualified professional. This sketch should show the items listed in Section E as applicable to the relief being sought.

### **Supporting Info:**

Please bear in mind that additional information may be required by the municipality, County, local and provincial agencies in order to evaluate the proposed Minor Variance. The required information may include studies or reports to deal with such matters as environmental impacts, traffic, water supply, sewage disposal and storm water management.

**Ontario Regulation 200/96**, as amended, outlines specific information which must be included within an application for minor variance. This is known as "prescribed information" and is identified by this symbol (\*) beside the question number.

**Approval Process:**

Upon receipt of an **application**, the required **fee** and **other information** as may be required, the Secretary Treasurer of the Committee of Adjustment or the Clerk of the municipality will notify those parties that are to receive notice under Ontario Regulation 200/96. This involves the circulation of the application to various agencies and abutting landowners for their comments. The applicant or agent will be requested to attend a public meeting to present the proposal. **Please note that it is in the applicant's best interest to ensure that they are represented at this meeting.** The applicant and any other parties requesting notice will be provided with a notice of any decision made by the Committee as well as the reasons for their decision.

**Further Information:**

Darren Jones, Chief Building Official  
Township of Wellington North  
7490 Sideroad 7 West, P.O. Box 125  
Kenilworth, ON N0G 2E0  
[djones@wellington-north.com](mailto:djones@wellington-north.com)  
Phone: 519.848.3620 Ext. 62  
Fax: 519.848.1119

**or**

Karren Wallace, Clerk  
Township of Wellington North  
7490 Sideroad 7 West, P.O. Box 125  
Kenilworth, ON N0G 2E0  
[kwallace@wellington-north.com](mailto:kwallace@wellington-north.com)  
Phone: 519.848.3620 Ext. 62  
Fax: 519.848.3228

**Fees:** **\$800.00**

**Copies:** 3 copies of this application, including the drawing and other information as may be specified shall be required.

**CORPORATION OF THE TOWNSHIP OF WELLINGTON NORTH**  
**APPLICATION FOR A MINOR VARIANCE**

Date Received: \_\_\_\_\_ Roll No.: \_\_\_\_\_

File Number: A \_\_\_\_\_ / \_\_\_\_\_ Application Fee Received: \$ \_\_\_\_\_

**A. GENERAL INFORMATION**

**1. \*APPLICANT INFORMATION**

a. \*Registered Owner's Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

b. \*Applicant (Agent) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

c. \*Name, Address, Phone No. of all persons having any mortgage charge or encumbrance on the property:

i. \_\_\_\_\_

ii. \_\_\_\_\_

iii. \_\_\_\_\_

d. Send Correspondence To: Owner [ ] Agent [ ] Other [ ]

**2. \*PROVIDE A DESCRIPTION OF THE "ENTIRE" PROPERTY**

a. Measurements are in: Metric [ ] Imperial [ ] units

b. Municipal Address: \_\_\_\_\_

c. Concession: \_\_\_\_\_ Lot: \_\_\_\_\_ Registered Plan No.: \_\_\_\_\_

d. Area: \_\_\_\_\_ Depth: \_\_\_\_\_ Frontage (Width): \_\_\_\_\_

e. Width of Road Allowance (if known): \_\_\_\_\_

3. **\*WHAT IS THE ACCESS TO THE SUBJECT PROPERTY?**

Provincial Highway [ ] Continually maintained municipal road [ ] Right-of-way [ ]  
County Road [ ] Seasonally maintained municipal road [ ] Water access [ ]

4. **\*IF ACCESS IS BY WATER ONLY, PLEASE DESCRIBE THE PARKING AND DOCKING FACILITIES USED OR TO BE USED AND THE APPROXIMATE DISTANCE OF THESE FACILITIES FROM SUBJECT LAND TO THE NEAREST PUBLIC ROAD.**

*(This information should be illustrated on the required drawing under item E of this application.)*

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5. **\*WHAT IS THE CURRENT OFFICIAL PLAN AND ZONING STATUS?**

- a. Official Plan Designation: \_\_\_\_\_  
b. Zoning: \_\_\_\_\_

**B. EXISTING AND PROPOSED SERVICES**

6. **\*INDICATE THE APPLICABLE WATER SUPPLY AND SEWAGE DISPOSAL:**

	Municipal Sewers	Communal Sewers	Private Septic	Municipal Water	Communal Well	Private Well
a. *Existing	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
b. Proposed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

7. **\*IS STORM DRAINAGE PROVIDED BY:**

- a. Storm Sewers [ ]  
b. Ditches [ ]  
c. Swales [ ]  
d. Other (explain below) [ ]

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8. **\*WHAT IS THE NAME OF THE ROAD OR STREET THAT PROVIDES ACCESS TO THE SUBJECT PROPERTY?**

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**C. REASON FOR APPLICATION**

9. **\*WHAT IS THE NATURE AND THE EXTENT OF THE RELIEF THAT IS BEING APPLIED FOR?**

*(Please specifically indicate on sketch)*

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10. **\*WHY IS IT NOT POSSIBLE TO COMPLY WITH THE PROVISIONS OF THE BY-LAW?**

*(Please specifically indicate on sketch)*

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**D. EXISTING SUBJECT AND ABUTTING PROPERTY LAND USES, BUILDINGS & THEIR LOCATIONS**

11. **\*WHAT IS THE "EXISTING" USE OF:**

a. The subject property: \_\_\_\_\_

b. The abutting properties: \_\_\_\_\_

12. **\*PROVIDE THE FOLLOWING DETAILS FOR ALL BUILDINGS ON OR PROPOSED FOR THE SUBJECT LAND:**

*(Please use a separate page if necessary.)*

	<b>Existing</b>	<b>Proposed</b>
a. Type of building(s) or structure(s)	_____	_____
b. Date of construction	_____	_____
c. Building height	____ (m) ____ (ft)	____ (m) ____ (ft)
d. Number of storey's (excluding basement)	_____	_____
e. Total floor area	_____ (sq m)	_____ (sq m)
	_____ (sq ft)	_____ (sq ft)



## **E. APPLICATION DRAWING**

- 18. \*PLEASE PROVIDE AN ACCURATE DRAWING OF THE PROPOSAL, PREFERABLY PREPARED BY A QUALIFIED PROFESSIONAL. IN SOME CASES IT MAY MORE APPROPRIATE TO SUBMIT ADDITIONAL DRAWINGS AT VARYING SCALES TO BETTER ILLUSTRATE THE PROPOSAL. THE DRAWING MUST INCLUDE THE FOLLOWING:**
- a. Owners' / applicant's name;
  - b. Legal description of property;
  - c. Boundaries and dimensions of the subject property and its current land use;
  - d. Dimensions of area of amendment (if not , the entire property);
  - e. The size and use of all abutting land;
  - f. All existing and proposed parking and loading areas, driveways and lanes;
  - g. The nature of any easements or restrictive covenants on the property;
  - h. The location of any municipal drains or award drains;
  - i. Woodlots, forested areas, ANSI's, ESA's, wetlands, floodplain, and all natural watercourses (rivers, stream banks, etc);
  - j. The dimensions of all existing and proposed buildings and structures on the subject land and their distance to all lot lines;
  - k. The name, location and width of each abutting public or private road, unopened road allowance or right of way;
  - l. If access to the subject land is by water only, provide the location of the parking and docking facilities to be used;
  - m. Other features both on site or nearby that in the opinion of the applicant will have an effect on the application (such as bridges, railways, airports, wells, septic systems, springs, slopes, gravel pits); and
  - n. The drawing should also include the scale, north arrow and date when the drawing was prepared.

**F. OTHER RELATED PLANNING APPLICATIONS**

**19. \*HAS THE APPLICANT/ OWNER MADE APPLICATION FOR ANY OF THE FOLLOWING ON THE SUBJECT LAND?**

- |                            |     |     |    |     |
|----------------------------|-----|-----|----|-----|
| a. Official Plan Amendment | Yes | [ ] | No | [ ] |
| b. Zoning By-law Amendment | Yes | [ ] | No | [ ] |
| c. Plan of Subdivision     | Yes | [ ] | No | [ ] |
| d. Consent (Severance)     | Yes | [ ] | No | [ ] |

**20. \*IF THE ANSWER TO QUESTION 19 IS YES, PLEASE PROVIDE THE FOLLOWING INFORMATION:**

a. File No. of Application: \_\_\_\_\_

b. Purpose of Application: \_\_\_\_\_

c. Status of Application: \_\_\_\_\_



**A. AUTHORIZATION FOR AGENTS / SOLICITOR TO ACT FOR OWNER:**

*(If affidavit (I) is signed by an Agent / Solicitor on Owner's behalf, the Owner's written authorization below **must** be completed)*

I (we) \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_,

County/Region of \_\_\_\_\_ do hereby authorize \_\_\_\_\_ to act as my agent in this application.

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

\_\_\_\_\_  
*Date*

**B. \*AFFIDAVIT:**

*(This affidavit be signed in the presence of a Commissioner)*

I (we) \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_,

County/Region of \_\_\_\_\_ solemnly declare that all the 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**.

DECLARED before me at the \_\_\_\_\_ of \_\_\_\_\_, County/Region of \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
*Signature of Owner or Authorized Solicitor or Authorized Agent*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Commissioner*

\_\_\_\_\_  
*Date*

**APPLICATION AND FEE OF \$ \_\_\_\_\_ RECEIVED BY MUNICIPALITY**

\_\_\_\_\_  
*Signature of Municipal Employee*

\_\_\_\_\_  
*Date*