



# Town of Fort Erie

## APPLICATION FOR MINOR VARIANCE 2020

Under Section 45 of the Planning Act R.S.O, 1990, c.P.13, as amended and other applicable legislation

**INFORMATION ON THIS FORM IS COLLECTED UNDER THE AUTHORITY OF THE ONTARIO PLANNING ACT AND WILL BE USED BY THE TOWN OF FORT ERIE IN THE PROCESSING OF THIS APPLICATION. THE INFORMATION AS WELL AS SUPPORTING STUDIES AND REPORTS MAY BE USED BY OTHER DEPARTMENTS AND AGENCIES FOR THE PURPOSE OF ASSESSING THE PROPOSAL AND PREPARING COMMENTS. THIS INFORMATION MAY ALSO BE RELEASED TO THE PUBLIC**

**Planning and Development Services  
The Corporation of the Town of Fort Erie  
1 Municipal Centre Drive  
Fort Erie, Ontario L2A 2S6**

**FOR OFFICE USE ONLY**

File # \_\_\_\_\_

Property: \_\_\_\_\_

Date Reviewed: \_\_\_\_\_ By: \_\_\_\_\_

Date Deemed Complete: \_\_\_\_\_

Date of Hearing: \_\_\_\_\_

“Date Received”

**APPLICANTS MUST SUBMIT THE FOLLOWING WITH THE MINOR VARIANCE APPLICATION. PLEASE CHECK ALL APPLICABLE BOXES AND SUBMIT WITH YOUR APPLICATION. KEEP COPIES FOR YOUR FILES**

**SUBMISSION REQUIREMENTS:**

- One (1) copy of original application form. The application should be **fully completed** by the property owner or authorized agent.
- One (1) copy of sketch (8.5"x 14") drawn to scale in **metric**, showing the following:
  - The boundaries and dimensions of the subject lands
  - The location, size and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the front yard lot line, rear yard lot line and the side yard lot lines and proximity of eaves/gutters to lot lines.
  - The approximate location of all natural and artificial features on the subject lands and on land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application. Examples include buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells, and septic tank.
  - The current uses on land that is adjacent to the subject land
  - The location, width and name of any roads within or abutting the subject land, indicating whether or not it is an unopened road allowance, a public travelled road, a private road or a right-of-way.
  - If access to the subject land is by water only, the location of the parking and docking facilities to be used.
  - The location and nature of any easement affecting the subject land.
- Property owner site access permission form and owner authorization (if applicable)
- Appointment with Secretary-Treasurer to submit and review application. Please note that a hearing date will not be appointed until the application has been deemed complete.

**NOTE: APPLICANTS SHOULD REVIEW THIS APPLICATION WITH THE PLANNING DEPARTMENT BEFORE SUBMITTING.**

**APPLICATION FEES: (To be submitted with application)**

<b>Town of Fort Erie:</b> <i>(includes \$10.00 surcharge for Lot Grading Poster) Receipt # _____</i>	<i>Received:</i> <input type="checkbox"/>
Residential Property	<b>\$943</b>
If building permit was not applied for prior to construction	<b>\$1777</b>
Multiple residential, commercial/industrial property	<b>\$1190</b>
If building permit was not applied for prior to construction	<b>\$2362</b>
<i>Full fee for first application plus 50% per additional application (multiple applications within Plan of Subdivision/Condominium)</i>	
<b>Niagara Peninsula Conservation Authority (NPCA):</b> <i>(Cheque made payable to NPCA) Receipt # _____</i>	<i>Received:</i> <input type="checkbox"/>
<b>Properties near a waterbody/water course or lands designated "hazard"</b> <i>Pre-consultation with the NPCA is necessary and will determine if application is subject to this fee.</i>	<b>\$410</b>
<b>Regional Municipality of Niagara:</b> <i>(Cheque made payable to Niagara Region) Receipt # _____</i>	<i>Received:</i> <input type="checkbox"/>
Regional Road or Infrastructure	<b>\$410</b>
Regional Road or Infrastructure plus Septic Inspection	<b>\$810</b>
Private Septic System Review (outside urban boundary or urban area property with private septic).	<b>\$400</b>
<b>Other Fees as required:</b>	
Adjournment Fee: should the applicant fail to appear at the hearing or request an adjournment (50% of application fee)	<b>50%</b>
Special Hearing	<b>\$609</b>

**Please contact the Region of Niagara and the Niagara Peninsula Conservation Authority to confirm the correct fees levied by them.**

**SECTION 1 – PROPERTY LOCATION AND DESCRIPTION:**

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

Legal description of the lands (Lot & Registered Plan or Concession): \_\_\_\_\_

\_\_\_\_\_

**Dimensions of the subject Property:** please indicate all measurements in *metric*

Lot Frontage: \_\_\_\_\_ Lot Depth: \_\_\_\_\_ Lot Area: \_\_\_\_\_

**Existing use of the subject property:**

Residential     Institutional     Commercial     Industrial     Other

Length of time the existing use of the subject property has continued: \_\_\_\_\_

Date of acquisition of the subject property by the current owner: \_\_\_\_\_

Date of construction of all buildings on the subject property: Dwelling: \_\_\_\_\_

Garage: \_\_\_\_\_ Shed: \_\_\_\_\_ Other: \_\_\_\_\_

**SECTION 2 – PRE-CONSULTATION REQUIREMENTS**

**Have you pre-consulted with any of the following staff or agencies?**

Town of Fort Erie:

Planning     YES     NO    Contact Name \_\_\_\_\_    Date: \_\_\_\_\_

Building     YES     NO    Contact Name \_\_\_\_\_    Date: \_\_\_\_\_

Niagara Region:     YES     NO    Contact Name \_\_\_\_\_    Date: \_\_\_\_\_

Others if applicable:  YES     NO

*(ie. Niagara Peninsula Conservation Authority, Niagara Parks Commission, Ministry of Transportation)*

*Please provide written documents if possible.*

**SECTION 3 - CONTACT INFORMATION (PLEASE PRINT CLEARLY)**

**Name of Applicant:** \_\_\_\_\_

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

Town/City: \_\_\_\_\_ Postal/Zip Code : \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Cell.: \_\_\_\_\_

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

**Name of Owner(s)** (if different from the applicant): \_\_\_\_\_

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

Town/City: \_\_\_\_\_ Postal/Zip Code : \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Cell.: \_\_\_\_\_

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

**Name of Agent** (if different from the applicant): \_\_\_\_\_

*(This may be a person or firm acting on behalf of the applicant and will be required to submit an authorization form)*

Agency Name: \_\_\_\_\_

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

Town/City: \_\_\_\_\_ Postal/Zip Code : \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Cell.: \_\_\_\_\_

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

**Main Point of Contact** \_\_\_\_\_ **Company** \_\_\_\_\_

*(this will be the person that will handle the file and liaise with the Town)*

Please check if property owner should also be copied on all communication  initial \_\_\_\_\_

**SECTION 4 – APPLICATION DETAILS (PLEASE PRINT CLEARLY)**

<b>What Variances are being Requested :</b> (i.e. to increase the height to build my garage from 4.5m to 5.0m):	<b>Section of Zoning By-law to be amended</b> (ie. 6.1.c)
1.	
2.	
3.	
4.	
5.	
6.	

Why is it not possible to comply with the provisions of the Zoning By-law?

**SECTION 5 – EXISTING SITE DETAILS**

**Are there any existing buildings on the subject property?**

YES, (please describe below)       NO (if no proceed to Section 5)

If the answer above is yes, please fill out the information below for all existing buildings on the subject property, including any and all accessory buildings **in metric**. Use a separate sheet, if necessary, to describe additional buildings.

**Existing Main Building location on the property (in metric):**

front yard setback	rear yard setback
side yard setback	side yard setback
height of building in metre	number of storeys
dimensions of building	floor area of building

**Existing Accessory Building location on the property (in metric):**

front yard setback	rear yard setback
side yard setback	side yard setback
height of building in metre	number of storeys
dimensions of building	floor area of building

**Other Building location on the property (in metric) – if applicable:**

front yard setback	rear yard setback
side yard setback	side yard setback
height of building in metre	number of storeys
dimensions of building	floor area of building

**SECTION 6–PROPOSED SITE DETAILS**

**Details of proposed development and use?**

(i.e. New garage to be constructed with a 2<sup>nd</sup> storey for storage purposes)

**Are there any buildings or structures proposed for the subject property?**

YES       NO

If the answer above is yes, please fill out the information below for all proposed buildings on the subject property **in metric**.

**Proposed Building #1 Description:**

front yard setback	rear yard setback
side yard setback	side yard setback
height of building in metre	number of storeys
dimensions of building	floor area of building
eaves/gutter setback to lot line: side	side                  rear                  front

**Proposed Building #2 Description:**

front yard setback	rear yard setback
side yard setback	side yard setback
height of building in metre	number of storeys
dimensions of building	floor area of building
eaves/gutter setback to lot line: side	side                  rear                  front



**SECTION 7- FOR OFFICE USE ONLY TO BE COMPLETED BY PLANNING STAFF**

**Is the subject property the subject of a current application for Plan of Subdivision or Consent (severance)?**

YES       NO      If yes, give File Number: \_\_\_\_\_

**Has the subject property ever been the subject of an application under The Planning Act**

YES       NO      If yes, give File Number: \_\_\_\_\_

**Current designation in the Town of Fort Erie Official Plan:** \_\_\_\_\_

**Current zoning in the Town of Fort Erie Comprehensive Zoning By-law:**

\_\_\_\_\_

**Means of access to the subject property:**

- municipal road
- seasonal municipal road
- regional road
- provincial highway
- private right-of-way

**How is water provided to the subject lands?**

- publicly owned and operated piped water system
- privately owned and operated individual or communal well
- lake or other body of water
- other means(describe): \_\_\_\_\_

**How is sewage disposal provided to the subject lands?**

- publicly owned and operated sanitary sewage system
- privately owned and operated individual or communal septic system
- other means(describe): \_\_\_\_\_

**How is storm drainage provided to the subject lands?**

- Sewers
- Ditches
- other means (describe): \_\_\_\_\_

## DECLARATION OF APPLICANT OR AUTHORIZED AGENT

THE FOLLOWING DECLARATION *MUST* BE SIGNED BY THE APPLICANT OR AGENT IN THE PRESENCE OF A COMMISSIONER FOR THE TAKING OF AFFIDAVITS

I, \_\_\_\_\_  
(Name of Applicant or Agent)

of the \_\_\_\_\_  
(Town, City or Township)

in the \_\_\_\_\_  
(Region, County or District)

solemnly declare that all the statements contained in this application are true, and I 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 by virtue of THE CANADA EVIDENCE ACT.

Dated at the: \_\_\_\_\_  
(Town, City or Township)

in the \_\_\_\_\_  
(Region, County or District)

this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant or Authorized Agent

### COMMISSIONER:

Declared before me at: \_\_\_\_\_  
(Town, City or Township)

in the \_\_\_\_\_  
(Region, County or District)

this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
A Commissioner, etc.



## SITE ACCESS CERTIFICATE (to be signed by Owner)

I, \_\_\_\_\_, the owner of the above-noted lands hereby grant  
Town of Fort Erie staff and/or Members of a Town Committee to enter the subject site  
( \_\_\_\_\_ ) to review and confirm the information provided with  
(Address)  
the application.

Proceeding will not commence until this is provided.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.  
(Town, City or Township)

\_\_\_\_\_  
*PLEASE PRINT NAME*

\_\_\_\_\_  
*SIGNATURE OF OWNER*  
*(AFFIX Corporate Seal if applicable)*

## AUTHORIZATION TO ACT ON BEHALF OF THE OWNER

**AUTHORIZATION:**

**(Must be filled in if Applicant and/or Agent is not the registered Owner of the lands)**

I/We, being the registered owner(s) of the lands subject of this application hereby authorize

\_\_\_\_\_ (Name of Person)

of the Town/City of \_\_\_\_\_ (Town, City or Township)

in the Regional Municipality of \_\_\_\_\_ (Region, County or District)

to make application on my/our behalf to the Town of Fort Erie for a Consent/Severance in accordance with Under Subsection 2, Section 53 of the Planning Act R.S.O, 1990, c.P.13 as amended.

Dated at the Town/City of \_\_\_\_\_ (Town, City or Township)

in the Regional Municipality of \_\_\_\_\_ (Region, County or District)

This \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Owner signature

\_\_\_\_\_  
Witness signature

\_\_\_\_\_  
Owner signature

\_\_\_\_\_  
Witness signature



**NOTE: IF THE REGISTERED OWNER IS A CORPORATION, THE CORPORATE SEAL MUST BE AFFIXED TO THIS FORM IN ADDITION TO THE SIGNATURE OF AUTHORIZED SIGNING OFFICERS.**