

# APPLICATION FOR MINOR VARIANCE

## FOR OFFICE USE ONLY

Date: \_\_\_\_\_

Application No. \_\_\_\_\_

## NOTE TO APPLICANTS

The information on this form that must be provided by the applicant is indicated in ***italics***. This information is prescribed in accordance with Ontario Regulation 41/95 made under the **Planning Act**. This mandatory information must be provided with the appropriate fee. If the mandatory information and fee are not provided, the Secretary-Treasurer will return the application, or refuse to further consider the application until the information and fee have been provided.

The application form also sets out other information that will assist the Committee of Adjustment and others in their planning evaluation of the consent application. To ensure the quickest and most complete review, this information should be submitted at the time of application. In the absence of this information, it may not be possible to conduct a complete review within the legislated timeframe for making a decision. As a result, the application may be refused.

## SUBMISSION OF THE APPLICATION

**Please submit one (1) completed application form**, along with the applicable fee of \$ \_\_\_\_\_. Further questions or inquiries should be directed to Ms. Cathy Cyr, Secretary-Treasurer, Committee of Adjustment, (705) 856-2244 ext. 222.

**1. APPLICANT INFORMATION**

1.1    **Name of Applicant** \_\_\_\_\_  
       **Address** \_\_\_\_\_  
       \_\_\_\_\_  
       **Telephone Number(s)** \_\_\_\_\_

1.2    *Name, telephone number and address of Owner(s), if different from the applicant. (Joint ownership must be shown.) An Owner's Authorization is required in Section 19, if the applicant is not the Owner.*

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

1.3    *Name, telephone number and address of the person who is to be contacted about the application, if different than the applicant. (This may be a person or firm acting on behalf of the applicant.)*

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

**2. LOCATION OF SUBJECT LAND (Complete applicable lines)**

2.1    District                      District of Algoma \_\_\_\_\_  
       Municipality                Municipality of Wawa \_\_\_\_\_  
       Lot Number(s) \_\_\_\_\_  
       Parcel Number(s) \_\_\_\_\_  
       Registered Plan No(s). \_\_\_\_\_  
       Lot(s), Block(s) \_\_\_\_\_  
       Mining Claim No. \_\_\_\_\_  
       Part Number(s) \_\_\_\_\_  
       Street No. \_\_\_\_\_      Name of Street/Road \_\_\_\_\_

2.2    *Are there any easements or restrictive covenants affecting the subject land?*

☐ Yes

☐ No

*If YES, please describe the easement or covenant and its effect.*

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

3. **NATURE AND EXTENT OF RELIEF APPLIED FOR**

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3.1 Why is it not possible to comply with the provisions of the by-law?

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4. **DIMENSIONS OF LAND AFFECTED**

FRONTAGE \_\_\_\_\_ DEPTH \_\_\_\_\_ AREA \_\_\_\_\_

5. **Particulars of all buildings and structures on or proposed for the subject land (specify ground floor area, gross floor, number of storeys, width, length, heights, etc.)**

**Existing**

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**Proposed**

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6. **Location of all buildings and structures on or proposed for the subject land (specify distance from side, rear and front lot lines).**

**Existing**

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**Proposed**

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7. **Date of Acquisition of Subject Land** \_\_\_\_\_
8. **Date of Construction of all buildings and structures on subject land.** \_\_\_\_\_
9. **Existing use of the subject property**
- \_\_\_\_\_
10. **Existing uses of abutting properties**
- \_\_\_\_\_
11. **Length of time the existing uses of the subject property have continued**
- \_\_\_\_\_
12. **Type of Access** (check appropriate box)
- ☐ Provincial Highway
  - ☐ Municipal Road, maintained all year
  - ☐ Municipal Road, seasonally maintained
  - ☐ Other Public Road
  - ☐ Right-of-Way
13. **Type of Water Supply Proposed** (check appropriate box)
- ☐ Publicly Owned and Operated Piped Water System
  - ☐ Privately Owned and Operated Individual Well
  - ☐ Privately Owned and Operated Communal Well
  - ☐ Lake or Other Water Body
  - ☐ Other means
14. **Type of Sewage Disposal Proposed** (check appropriate box)
- ☐ Publicly Owned and Operated Sanitary Sewer System
  - ☐ Privately Owned and Operated Individual Septic Tank
  - ☐ Privately Owned and Operated Communal Septic Tank
  - ☐ Privy
  - ☐ Other means
- (1) A certificate of approval from the Algoma Public Health (18 Ganley Street, Wawa (705) 856-7208) or Ministry of Environment (70 Foster Dr. #110, Sault Ste Marie (705) 942-6354) submitted with this Application will facilitate the review.

**15. LAND USE**

15.1 What is the present OFFICIAL PLAN designation(s) of the subject land?

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15.2 What is the present ZONING of the subject land?

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**16. HISTORY OF SUBJECT LAND**

16.1 Has the owner previously applied for relief in respect to the subject property?

☐ Yes

☐ No

☐ Unknown

If YES, please describe the easement or covenant and its effect.

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16.2 Is the subject property the subject of a current application for Consent under Section 53 of the Planning Act?

☐ Yes

☐ No

☐ Unknown

If YES, please describe the easement or covenant and its effect.

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**17. SKETCH (Use attached Sketch Sheet on page 8)**

17. The application must be accompanied by a Sketch showing the following:

- ◆ the boundaries and dimensions of the subject land;
- ◆ the boundaries and dimensions of any land owned by the owner of the subject land and that abuts the subject land;
- ◆ the location of all land previously severed from the parcel originally acquired by the current owner of the subject land;
- ◆ the approximate location of all natural and artificial features on the subject land and adjacent lands that in the opinion of the applicant may affect the application, such as buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded area, wells and septic tanks;
- ◆ existing use(s) on adjacent lands;
- ◆ the location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road or a right-of-way; and
- ◆ location and nature of any easement affecting the subject land.

18. **AFFIDAVIT OR SWORN DECLARATION**

I, \_\_\_\_\_, of the Municipality of Wawa, in the District of Algoma, make oath and say (or solemnly declare) that the information contained in this application is true and that the information contained in the documents that accompany this application is true.

**SWORN BEFORE ME AT THE  
MUNICIPALITY OF WAWA  
IN THE DISTRICT OF ALGOMA**

\_\_\_\_\_  
COMMISSIONER OF OATHS

\_\_\_\_\_  
APPLICANT

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

19. **AUTHORIZATION**

If the applicant is not the owner of the land that is the subject of this application, the written authorization of the owner that the applicant is authorized to make the application must be included with this form or the authorization set out below must be completed.

19.1

**AUTHORIZATION OF OWNER FOR AGENT  
TO MAKE APPLICATION**

I, \_\_\_\_\_ am the owner of the land that is the subject of this application for a consent and I authorize \_\_\_\_\_ to make this application on my behalf.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER

19.2 If the applicant is not the owner of the land that is the subject of this application, please complete the authorization of the owner concerning personal information set out below.

**AUTHORIZATION OF OWNER FOR AGENT  
TO PROVIDE PERSONAL INFORMATION**

I, \_\_\_\_\_ am the owner of the land that is the subject of this application for a consent and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I authorize \_\_\_\_\_ as my agent for this application, to provide any of my personal information that will be included in this application or collected during the processing of the application.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER

20. **CONSENT OF THE OWNER**

Complete the consent of the owner concerning personal information set out below.

**CONSENT OF THE OWNER TO USE AND  
DISCLOSURE OF PERSONAL INFORMATION**

I, \_\_\_\_\_ am the owner of the land that is the subject of this application for a consent and for the purposes of the **Freedom of Information and Protection of Privacy Act**, I authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected under the authority of the **Planning Act** for the purpose of processing this application.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER

The Committee of Adjustment will assign a **FILE NUMBER** for complete applications and this should be used in all communications.

## SKETCH SHEET

