

APPLICATION FOR APPROVAL OF A DRAFT PLAN OF SUBDIVISION OR CONDOMINIUM DESCRIPTION

Regional Municipality of Durham Planning Department 605 Rossland Road East, 4th Floor P.O. Box 623, Whitby, Ontario L1N 6A3 Telephone (905) 668-7711 Facsimile (905) 666-6208

This application form is to be used by persons or public bodies where the Regional Municipality of Durham is the Approval Authority for the proposed plan of subdivision or condominium description. In this form, the term "subject land" means the land that is the subject of this application. The application is to be submitted to the **Regional Municipality of Durham**, **Planning Department**, **605 Rossland Road East**, **4**th **Floor**, **P.O. Box 623**, Whitby, Ontario, L1N 6A3 – Telephone (905) 668-7711, or Toronto Line (905) 686-1651, or Facsimile (905) 666-6208.

Submission of this application constitutes tacit consent for authorized Regional and area municipal staff representatives to inspect the subject lands or premises and to carry out any inspections, tests and investigations as may be required.

Pre-consultation

Pre-consultation is a mandatory part of the application process. Through this process, you will be informed of any requirements that may apply within the Durham Regional Official Plan and from Provincial policies and plans. Prior to submitting this form to the Region, it is required that at least one meeting be held with Regional Planning staff, staff from other Regional Departments, the area municipality, the applicable Conservation Authority and other review agencies as deemed appropriate. Following the meeting, the Planning Department shall prepare a Record of Pre-consultation outlining the information to be provided in order that the application may be deemed complete.

If this application does not conform to the Durham Regional Official Plan or Area Municipal Official Plan, applications to amend the respective Official Plans are required and must be submitted to and accepted by the Region and area municipality. This will facilitate co-ordinated circulation to the appropriate public bodies.

Completeness of the Application

The information in this form must be provided by the applicant. This information must be provided with the appropriate fee(s), draft plan and technical information or reports as outlined in this form and the Record of Pre-consultation to ensure the quickest and most complete review and to deem the application complete under the Planning Act. In the absence of this information, it may not be possible to do a complete review within the legislated time frame for making a decision. As a result, **if the required information is not provided, the application may be returned until these materials are submitted.**

Submission Requirements

Fees: (payable by cheque or money order)

- a non-refundable fee of \$4,500.00 and \$100.00 per unit for units in excess of 50 units, payable to the Regional Municipality of Durham. An additional fee of \$1,125.00, payable to the Regional Municipality of Durham, must be submitted prior to final approval of the application;
- a non-refundable fee of \$325.00 per lot creation, payable to the Regional Municipality of Durham, for any developments based on partial or private services, which is the Regional Health Department's review fee; and
- A non-refundable fee payable to the applicable Conservation Authority, for lands potentially affected by flooding or erosion or other lands within its jurisdiction. Please contact the appropriate Conservation Authority to determine the exact fee amount (refer to page 11) for contact information.
- □ Please contact the appropriate area municipality to determine any additional fees they may collect.

Forms and Information:

- **10 copies** of the completed application form and declaration;
- **25 copies** of the draft plan, folded to a size suitable for mailing;
- the information required under Section 51(17) of the Planning Act (shown on the face of the plan);
- **10 copies** of each plan or map on an $8\frac{1}{2}$ " x 11" or 14" sheet of paper; and
- 6 copies of all supporting technical and background reports. The nature of the information and/or reports will vary with the type of land uses proposed and the existing land use and topographic features.

Please also provide electronic versions of reports/plans. Measurements are to be indicated in metric units. July 2010

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Department

Regional Municipality of Durham Planning Department 605 Rossland Road East, 4th Floor P O Box 623, Whitby, Ontario L1N 6A3 Telephone (905) 668-7711 Facsimile (905) 666-6208

| | REGIONAL USE ONLY | | | DATE RECEIVED | | |
|--------------|--|--|-------------------------------|--------------------------------|----------------------------------|--|
| File Number: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Application for Approval of a Plan of Subdivision | | Application fo Condominium | r Approval of a Description | Resubmission of an earlier plan? | |

plan? □Yes □ No □ Unknown

1. PRE-CONSULTATION

a) Have you formally consulted with staff of the Region of Durham, area municipalities and other agencies prior to submitting this application?
□ Yes □ No

Date of Record of Pre-Consultation:

Parties/Agencies in Attendance:

2. <u>CONTACTS</u>

| Applicant Information | Mailing Addre | ess | Contact Numbers |
|-----------------------|---------------|----------|-----------------|
| Registered Owner * | • | | Home |
| | | | Business |
| | Post | tal Code | Fax |
| | | | Email |
| Applicant ** | | | Home |
| | | | Business |
| | Post | tal Code | Fax |
| | | | Email |
| Agent or Solicitor | | | Home |
| | | | Business |
| | Post | tal Code | Fax |
| | | | Email |
| Ontario Land Surveyor | | | Home |
| | | | Business |
| | Post | tal Code | Fax |
| | | | Email |

* If more than one owner, please attach a sheet of paper with the required information. If numbered company, give name and address of principal owner.

** Owner's authorization (Section 13) is required if the applicant is not the owner.

a) Names and addresses of any mortgagees, holders of charges or other encumbrances

| b) | Correspondence should be sent to (one only): | Owner |
|-----|--|-------|
| Thi | s person will act as the <i>application co-ordinator</i> . | |

Applicant

□ Agent / Solicitor

3. LOCATION OF LAND

a) Complete the applicable lines:

| Area Municipality | Lot(s) | Concession(s) | Former Twp |
|-----------------------------|---------------------|--------------------|-----------------------|
| | | | |
| Registered Plan No. | Lot(s) / Block(s) | Reference Plan No. | Part Number(s) |
| | | | |
| Municipal Address (number a | and name of street) | | Assessment Roll No(s) |
| | | | |

b) Are there any existing easements, rights-of-way, restrictive covenants or aboriginal land claims negotiations affecting the subject land or is it covered by a provincial / aboriginal co-management agreement? □ Yes □ No

If yes, please describe.

| lf <u>yes</u> , | please describe a | and show on the | e plan the natu | ire and locatior | n of the easem | nent, rights-of-wa | ay or |
|-----------------|--------------------|-----------------|-----------------|------------------|----------------|--------------------|-------|
| other i | rights over adjace | nt properties. | | | | | |

d) Indicate the location and area of adjoining or nearby land in which the owner has an interest, if any.

4. PROPOSED AND CURRENT LAND USE(S)

a) Complete the following table

| Proposed Land Use(s) | Number of Units or Dwellings | Number of Lots and/or Blocks on the Draft Plan | Area (hectares) | NET Density (units / dwellings per hectare) |
|-------------------------------|---------------------------------|--|-----------------|---|
| Detached residential | | | | |
| Semi-detached residential | | | | |
| Multiple attached residential | | | | |
| Apartment residential | | | | |
| Seasonal residential | | | | |
| Mobile home | | | | |
| Other residential (specify) | | | | |
| Commercial | Nil | | | Nil |
| Industrial | Nil | | | Nil |
| Park, Open space | Nil | | | Nil |
| Institutional (specify) | Nil | | | Nil |
| Roads | Nil | | | Nil |
| Other (specify) | Nil | | | Nil |
| Totals | | | | |

c) What is the subject land currently designated in the applicable official plans and zoned in the zoning bylaw?

Durham Regional Official Plan:

Area Municipal Official Plan:

Area Municipal Zoning By-law:

d) Is there an airport nearby? □ Yes □ No

If yes, at what distance from site? _____ metres

e) Has the grading of the subject land been changed by the addition of earth or other material? □ Yes □ No

5. SITE CONTAMINATION

The attached **Site Screening Questionnaire** must be completed by a Qualified Person and submitted with this application. Phase 1 ESA submitted concurrently.

6. MINIMUM DISTANCE SEPARATION FROM EXISTING LIVESTOCK FACILITIES

If the subject land is within 2000 metres of an existing livestock barn or manure storage facility, then the attached **Minimum Distance Separation Data** Sheet must be completed and submitted with this application.

7. CONDOMINIUM APPLICATIONS ONLY

a) Complete the following table:

| Has a site plan for the proposed condominium been approved? | Yes | No |
|--|-----|----|
| Number of parking spaces provided? | | |
| Has a site plan agreement been entered into? | Yes | No |
| Has a building permit for the proposed condominium been issued? | Yes | No |
| Has construction of the development started? | Yes | No |
| If construction has been completed, indicate the date of completion. | | |
| Is this a conversion of a building containing rental residential units? | Yes | No |
| If <u>yes</u> , indicate the number of units to be converted. | | |
| (If ves , please refer to the applicable regional and area municipal official plan policies in conditions to be satisfied to ensure an adequate supply of rental accommodation in the area municipality.) | | ne |

8. STATUS OF OTHER PLANNING APPLICATIONS

a) Has a previous application for approval of a plan of subdivision / condominium or a consent application ever been submitted for the subject land? □ Yes □ No

If yes, indicate the appropriate application file number(s) and the decision(s) made on the application(s).

| File Number: Decision | |
|---------------------------|--|
|---------------------------|--|

b) Does this application conform to the Durham Regional Official Plan? □ Yes □ No

If <u>**no**</u>, a Durham Regional Official Plan Amendment application must be received and accepted by the Region, otherwise this application will be considered to be premature.

c) Has an application for approval of a proposed Durham Regional Official Plan amendment been submitted for the subject land?
□ Yes □ No

If <u>yes</u>, indicate the Region's file number and the status of the application.

| File Number: | Status: | |
|--------------|---------|--|
| | | |

If <u>no</u>, an Area Municipal Official Plan Amendment application must be received and accepted by the area municipality, otherwise this application will be considered to be premature.

e) Has an application for approval of a proposed Area Municipal Official Plan Amendment been submitted for the subject land?
□ Yes □ No

If yes, indicate the area municipality's file number and the status of the application.

| File Number: | Stat | itus: |
|--------------|------|-------|
| | | |

f) Has an application for approval of consent, site plan, minor variance, zoning by-law amendment or Minister's zoning order amendment application been submitted for the subject land?
□ Yes □ No

If yes, indicate the following:

| Type(s) of | File Number: | Status: | |
|----------------|--------------|---------|--|
| Application(s) | | | |
| Type(s) of | File Number: | Status: | |
| Application(s) | | | |

 g) Has an application for approval of a consent, site plan, minor variance, zoning by-law amendment or Minister's zoning order amendment application been submitted for land within 120 metres of the subject land? □ Yes □ No

If **yes**, indicate the following:

| Type(s) of Application(s) | File Number: | Status: | |
|------------------------------|--------------|---------|--|
| Type(s) of Application(s) | File Number: | Status: | |

h) Is the subject land covered by the Minister's zoning order?

□ Yes
□ No

If ves, what is the Ontario Regulation number?_

i) Are the water, sewage, stormwater and/or road works associated with the proposal subject to the provisions of the Environmental Assessment Act?
□ Yes □ No

If <u>yes</u>, briefly explain the works involved and attach a statement from a qualified engineer explaining the nature of the works and class(es) of Environmental Assessment required to implement the development.

9. PROVINCIAL POLICY

a) Is this application consistent with the Policy Statements issued under subsection 3(1) of the Planning Act?

Explain how the application is consistent with the Provincial Policy Statement (PPS) (incorporate as part of Planning Justification Report if possible).

b) Explain how the application is consistent with Places to Grow, Growth Plan for the Greater Golden Horseshoe (incorporate as part of Planning Justification Report if possible).

c) Is the subject land(s) within an area designated under any of the following provincial plans?

| Oak Ridges Moraine Conservation Plan (2002) | □ Yes | □ No |
|---|-------|------|
| Greenbelt Plan (2005) | □ Yes | □ No |
| Other (Specify): | □ Yes | □ No |

Explain how the application conforms to or does not conflict with each of the applicable Provincial Plan(s) (incorporate as part of Planning Justification Report if possible).

10. SERVICING

a) Indicate below the proposed type of servicing. Any servicing information/reports required are to be attached.

| Method of Sewage Disposal | Method of Water Supply |
|-------------------------------|------------------------------|
| Municipal piped sewage system | Municipal piped water system |
| □ Individual septic system | Individual wells |
| Other () | Other () |

Note: All development on individual on-site sewage systems or tanks requires a geotechnical report and hydrogeological report. Before undertaking the preparation of such reports, consult the appropriate approval authority (Area Municipality or Region's Health Department) about the type of geotechnical report and hydrogeological assessment required.

11. <u>REPORTS, MAPPING AND SIGNS</u>

Reports

The application may be deemed incomplete without the submission of the required reports identified in the Record of Pre-consultation. See Submission Cover Letter

a) List the title, author and date of any reports attached to this submission, if applicable.

| Title | Author | Date |
|-------|--------|------|
| | | |
| | | |
| | | |
| | | |
| | | |

Digital Mapping Information

For more information on the preferred file formats and mapping specifications, contact the Region or the applicable area municipality. A computer disk containing the digital plotting of the proposed subdivision should be submitted with the application. The digital file should have a textual description of file format, map standards used, scale, contact person and location information, such as lot, concession and area municipality.

b) Is digital mapping attached?
□ Yes □ No

Sign(s) Information

A sign may be required to inform the public of the proposed application on the subject land. **Contact the area municipality for requirements and standards.** July 2010

12. **AFFIDAVIT OR SWORN DECLARATION**

a) Affidavit or Sworn Declaration for the Information Prescribed in the Planning Act (Please Print)

_____ of the _____ Ι, _ _ in the

solemnly declare that all the statements contained in this application and in 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. I also agree to allow the Region of Durham and the area municipality, its employees and agents to enter up on the subject land for the purpose of conducting surveys and tests that may be necessary to review this application. I further agree for the purposes of the Municipal Freedom of Information and Protection of Privacy Act to 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 purposes of processing this application. I further agree to maintain all vegetation on site, including woodlots, and shall not cut or destroy any vegetation or re-grade the site during the processing of this application and fully understand and agree to comply with all of the acknowledgements as set out above.

| Declared before me at the | City | | of | Vaughan | in the | Regional Municipality | of |
|---------------------------|--------|-----|----|----------------|--------|-----------------------|----|
| York | this _ | 8th | _ | _day of _April | r- | 20_21. | - |

Commissioner of Oaths

13. **AUTHORIZATIONS**

a) If the applicant is not the owner of the subject land, the written authorization of the owner that the applicant is authorized to make the application must be attached or the authorization set out below must be completed by the owner.

Authorization of Owner for Agent to Make the Application

own the subject land, that is the subject of this application for approval of a plan of subdivision or condominium description and I authorize to make this application.

08 April 2021 Date

Signature of Owner

Signature of Owner or Applicant

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

Authorization of Owner for Agent to Provide Personal Information

am the owner of the land that is the subject of this Ι, application for approval of a plan of subdivision or condominium description and, for the purpose 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 purposes of processing this application.

08 April 2021

Signature of Owner

14. **CONSENT OF OWNER**

L ____am the owner of the land that is the subject of this application for approval of a plan of subdivision or condominium description and, for the purpose 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 purposes of processing this application.

08 April 2021

Date

Date

Signature of Owner



SITE CONTAMINATION SCREENING QUESTIONNAIRE

Phase 1 ESA Submitted Concurrently

Regional Municipality of Durham Planning Department 605 Rossland Road East, 4th Floor P.O. Box 623, Whitby, Ontario L1N 6A3 Telephone (905) 668-7711 Facsimile (905) 666-6208

This form must be completed for all development applications unless a Phase 1 Environmental Site Assessment, prepared in accordance with O. Reg. 153/04 and the Province's *Guideline for Use at Contaminated Sites in Ontario* is provided. This form must be completed and signed by a Qualified Person under O. Reg. 153/04 and by the property Owner.

Location of Subject Lands:

| Lot | 1 | | Conc: | Municipality: | Former Township: | | | |
|-----|---|-------------------|------------------|--|----------------------------|-----|----|--|
| | | | | | | | | |
| 4 | 1. Is the application on lands, or adjacent to lands, that were previously used for the following: | | | | | | | |
| 1. | is the | ар | plication on lar | ids, or adjacent to lands, that were previous | siy used for the following |]. | | |
| | -) | | | | | Yes | No | |
| | a) | Inc | lustrial uses? | | | | | |
| | b) | bu | | where there is potential for site contamina sing facility, including a gasoline outlet or a tion)? | | | | |
| | C) | Wł | nere filling has | occurred? | | | | |
| | d) | Un | derground stor | rage tanks or buried waste on the property? | 2 | | | |
| | | | | spills, or hazardous chemical uses, or wher used as pesticides (i.e. an orchard)? | e cyanide products | | | |
| | f) | A١ | weapons firing | range? | | | | |
| 2. | | | | y of the application within 500 metres (1,640 er landfill or dump, or a waste transfer station | | | | |
| 3. | 3. If there are existing or previously existing buildings, are there any building materials remaining on the site which are potentially hazardous to public health (i.e. asbestos, PCBs, etc)? | | | | | | | |
| 4. | . Is there any reason to believe that the lands may have been contaminated based on previous land use? | | | | | | | |
| 5. | What is the current use of the property? Circle appropriate use(s): industrial, commercial, community use, residential, institutional, parkland or agricultural. Refer to O. Reg. 153/04 for definitions. | | | | | | | |
| 6. | Does the application involve a change of property use from one of industrial, commercial or community use to residential, institutional, parkland or agricultural use? | | | | | | | |
| Env | If the answer to any of Questions 1 – 4 or Question 6 was yes, a Phase 1 and 2 Environmental Site Assessment, in accordance with O. Reg 153/04 is required. Please provide 2 copies. | | | | | | | |
| 7. | Has an Environmental Site Assessment been prepared for this site within the last 5 | | | | | | | |
| 8. | Certif <i>If yes</i> | cai , p | te of Property l | been accepted by the Ministry of the Enviro Jse been issued by MOE for this site? 2 copies of the risk assessment and cer on. | | | | |



SITE CONTAMINATION SCREENING QUESTIONNAIRE

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Declaration

To the best of my knowledge, the information provided in this questionnaire is true, and I have no reason to believe that the subject site contains contaminants at a level that would interfere with the proposed property use.

I am a qualified person with the required liability insurance stated in O. Reg. 153/04.

| Qualified Person: | | Property Owner or Authorized Officer: | | |
|----------------------------------|---|---------------------------------------|----------|--|
| Name (please print): | | Name (please print): | | |
| Name of Firm <i>(if applicat</i> | ame of Firm <i>(if applicable)</i> Name of Company <i>(if applicable)</i> | | licable) | |
| Address | | Address | | |
| Tel: Fax: | | Tel: | Fax: | |
| Signature: | | Signature | | |
| Date: | | Date: | | |



Department

See submitted MDS Statement of Conformity

MINIMUM DISTANCE SEPARATION SHEET

Regional Municipality of Durham Planning Department 605 Rossland Road East, 4th Floor P.O. Box 623, Whitby, Ontario L1N 6A3 Telephone (905) 668-7711 Facsimile (905) 666-6208

This form is to be completed when applying for a new non-farm use within 1000 metres for a Type A land use* and 2000 metres for a Type B land use* of an existing livestock facility. **Complete one sheet for each different set of buildings used for housing livestock.**

Owner of Livestock Facility:

Township:

Lot:

Concession:

Closest distance from livestock facility to the property boundary of the new lot(s) or the change in land use (metres)

Closest distance from manure storage to the property boundary of the new lot(s) or the change in land use (metres)

Tillable hectares where livestock facility located

| Type of Livestock | | | Existina | Existing Manure System (place an "x" in one box only | | | |
|-------------------|-----|---|-----------------------|--|-----------------------|------------------------|------------------------------|
| | - , | | Housing Capacity # | Covered Tank | Open Solid Storage | Open Liquid Tank | Earthen Manure Storage |
| Dairy | | Milking Cows Heifers | | | | | |
| Beef | | Cows (barn confinement) | | | | | |
| DEEI | | Cows (barn commercent) Cows (barn with yard) | | | | | |
| | | Feeders (barn | | | | | |
| | | confinement) | | | | | |
| | П | Feeders (barn with yard) | | | | | |
| Swine | | Sows | | | | | |
| | | Weaners | | | | | |
| | | Feeder Hogs | | | | | |
| Poultry | | Chicken Broilers/Roasters | | | | | |
| | | Caged Layers | | | | | |
| | | Chicken Breeder Layers | | | | | |
| | | Pullets | | | | | |
| | | Meat Turkeys (>10 kg) | | | | | |
| | | Meat Turkeys (5-10 kg) | | | | | |
| | | Meat Turkeys <i>(<5 kg)</i> | | | | | |
| | | Turkey Breeder Layers | | | | | |
| Horses | | Horses | | | | | |
| Sheep | | Adult Sheep | | | | | |
| | | Feeder Lambs | | | | | |
| Mink | | Adults | | | | | |
| Veal | | White Veal Calves | | | | | |
| Goats | | Adult Goats | | | | | |
| | | Feeder Goats | | | | | |
| Other MDS Pr | | _() | | | | | |

MDS Prepared by:

Name (please print)

Signature

* The Ontario Ministry of Agriculture and Rural Affairs, in their MDS Implementation Guidelines states that Type A land uses are characterized by uses that have a lower density of human occupancy, habitation or activity, such as residential dwellings on lots zoned agriculture and Type B land uses are characterized by uses that have a higher density of human occupancy, habitation or activity, such as residential subdivisions or major recreational uses.

| FOR | R REGIONAL USE ONLY | |
|------------------------------|--|------|
| Minimum Separation Distance: | Does the application comply with M requirements? | IDS |
| | Yes 🗆 | No 🗆 |
| Prepared by: | Date: | |
| | | |





Planning and Economic Development Department

Regional Municipality of Durham Planning and Economic Development Department 605 Rossland Road East, 4th Floor P.O. Box 623, Whitby, Ontario L1N 6A3 Telephone (905) 668-7711 Facsimile (905) 666-6208

Please complete the following and attach to your planning application

Check relevant Conservation Authority:

| Central Lake Ontario Conservation Authority |
|---|
| 100 Whiting Avenue, Oshawa, Ontario, L1H 3T3 Tel: (905) 579-0411 Fax: (905) 579-0994 |
| Ganaraska Region Conservation Authority |
| P.O. Box 328, Port Hope, Ontario, L1A 3W4 Tel: (905) 885-8173 Fax: (905) 885-9824 Kawartha Region Conservation Authority |
| 277 Kenrei Road, RR #1, Lindsay, Ontario, K9V 4R1 Tel: (705) 328-2271 Fax: (705) 328-2286 |
| Lake Simcoe Region Conservation Authority |
| 120 Bayview Parkway, Box 282, Newmarket, Ontario, L3Y 4X1 Tel: (905) 895-1281 Fax: (905) 853-5881 |
| Toronto and Region Conservation Authority |
| 5 Shoreham Drive, Downsview, Ontario, M3N 1S4 Tel: (416) 661-6600 Fax: (416) 661-6898 |
| Date: |
| Application Number: |
| Name of Applicant / Agent |
| Address: |
| Telephone: |
| Fax: |
| Name of Registered Owner: |
| Address: |
| Telephone: |
| Fax: |
| Legal Description (Lot and Concession Numbers): |
| General Location: |
| Municipality: |

Please consult the Conservation Authority to confirm the appropriate fee prior to completing the applicable boxes below. Please attach the fee made payable to the **appropriate Conservation Authority**.

| Application Type | Number of Applications Provided | Fee Amount Provided |
|---------------------------------------|------------------------------------|---------------------|
| Plan of Subdivision | | |
| Plan of Condominium | | |
| Consent / Severance | | |
| Site Specific Official Plan Amendment | | |
| Site Specific Zoning By-law Amendment | | |
| Site Plan Approval (Section 41) | | |
| Minor Variance | | |

Please check box if receipt required from the Conservation Authority

NOTE: Only one set of application fees (the highest fee) will apply when processing and reviewing consolidated application circulation. Additional fees may apply to applications which require extensive investigation (i.e. reports) by conservation authority staff. The applicant will be informed by letter of these additional fee requirements if applicable.

_CFN: _____

For Conservation Authority use only

Date Received _____

_Recipient: ____