

MUNICIPALITY OF BAYHAM 56169 Heritage Line P.O. Box 160 Straffordville, ON N0J 1Y0

File No. OPA-

APPLICATION FOR AMENDMENT TO THE OFFICIAL PLAN OF

Phone (519) 866-5521 ~ Fax (519) 866-3884

THE MUNICIPALITY OF BAYHAM

This application must be filed with the Planning Coordinator/Deputy Clerk or designate of the Municipality of Bayham along with payment for the required amount. The applicant should retain one copy for their records.

The information in this form must be completed in full. This mandatory information must be

provided with a fee of \$3,542.00. If the be returned.	application is not completed in full, the application will
I/We,	shall assume responsibility for
•	osited amount related to the said application and of said additional costs shall be a condition of this accept all costs as rendered.
Property Owner Signature	
Property Owner Signature	
FOR OFFICE USE ONLY	
DATE RECEIVED:	AMOUNT RECEIVED:
DEEMED COMPLETE:	RECEIPT#:
FILE NO: OPA -	DATE ADOPTED BY COUNCIL:

1.	Registered Owner's Name:		
	Address:		
		Business:	
	Fax:	Email:	
	Lot and Concession (if applical	ble):	
2.	Applicant / Authorized Agent:		
	Address:		
	Phone No.:	Fax:	
	Email:		
	Please specify to whom all com	nmunications should be sent:	
	Registered Owner () A	Applicant / Authorized Agent ()	
3.	Legal Description of the land	I for which the amendment is requested:	
	Concession: Lo	ot: Roll # <u>34 - 01 -</u>	
	Reference Plan No:	Part Lot:	
	Street and Municipal Address N	No.:	
4.	Size of property which is sub	oject to this Application:	
	Area: m2	2 Frontage: m_ Depth:	m
5.	Does the proposed amendme Official Plan?	ent add, change, replace, or delete a policy/sched	lule of the
	Add () Change ()	Replace () Delete ()	
	If so, policy/schedule to be add	led, changed, replaced, or deleted:	
	Attach separately the request	ted additions, changes, or replacements.	

6.	Does the proposed amendment alter a growth boundary of any settlement area? Yes / No
	If so, attach separately justification for the request based on the current Official Plan policies.
7.	Does the proposed amendment remove land from an area of employment designation? Yes / No
	If so, attach separately justification for the request based on the current Official Plan policies.
8.	Existing Official Plan Designations:
	Land Uses Permitted in existing Designation:
9.	Present Use of subject lands (Be specific):
10.	Proposed Official Plan Designation:
11.	What is the purpose of the proposed Official Plan amendment?

Description of proposed developm permitted uses, buildings or struct					
Services existing or proposed for t	he su	bject lands: Ple	ease indicate	with a ✓	
Water Supply	Ex	isting	Pro	pposed	
Municipal Piped Water Supply	()	()	
Private Drilled Well	()	()	
Private Dug Well	()	()	
Communal Well	()	()	
Lake or other Surface Water Body	()	()	
Other	()	()	
Sewage Disposal	Ex	isting	Pro	pposed	
Municipal Sanitary Sewers	()	()	
Individual Septic System	()	()	
Communal System	()	()	
Privy	()	()	
Other	()	()	
Note: If the proposed development is on a private or communal system and generate morthan 4500 litres of effluent per day, the applicant must include a servicing options report and a hydrogeological report.					
Are these reports attached?					
If not, where can they be found?					
Storm Drainage					
Provisions:					

	Planning Act for:							
l	Minor Variance ()	Offi	cial Plan ame	endment ()	Consent ()	
	Zoning By-law am	endment ()	Plan of Sub	odivision ()	Site Plan())	
	f yes to any of th affects, purpose,						proval authority, th ent.	e land it
	How is the propo	sed amend	ment	consistent v	vith the Pr	ovincia	al Planning Stateme	ent 2024
	Are the subject la yes, does the pro			_	•		cial Plan(s)? If the Plan(s)?	answer

- 17. The Owner is required to attach the following information with the application and it will form part of the application. Applications will not be accepted without the following.
 - (a) Survey plan, or a sketch based on an Ontario Land Surveyor description of all lands in the Owner's possession in the vicinity of the subject application with the lands covered by this application outlined in red, and showing the location, size and use of all buildings and structures on the Owner's lands and on all adjacent properties. Measurements to be in metric.

	(b)	Large scale detailed plan of the proposed development, showing the location and type of all buildings, setbacks, number and floor area or dwelling units (if applicable) the location of driveways, parking or loading spaces, landscaping areas, planting strips, and other uses.
	(c)	Written comments from the Southwestern Public Health, Long Point Region Conservation Authority and Ministry of Transportation (if applicable).
18.	owne corp	s application is signed by an agent or solicitor on behalf of an applicant(s), the er's written authorization must accompany the application. If the applicant is a oration acting without an agent or solicitor the application must be signed by an er of the corporation and the seal if any must be affixed.
19.	Addi	tional Information as required by Council consideration of the application

/We,		, of th	e _
	Name		Town/Township/City/Village etc.
of _	Municipality Name	, in the county of _	county Name , do solemnly declare:
i)	that I/We am/are the own		
•,	that have annual of the own		
ii)	that to the best of my/ou given in this application	_	lief, all of the information and statements ransmitted are true.
iii)	that I/We hereby appoint behalf in all aspects of th		to act as an Agent on my/our
	Owner(s) Signature:		
	_		
			usly believing it to be true, and knowing that at ath, and by virtue of the <i>"Canada Evidence</i> "
DECL	.ARED BEFORE ME at the:		
		of	Owner / Agent
n the	County/Region of:	this	<u> </u>
day o			
ay o	f	20	
			Owner / Agent
	A Commissioner, etc.		Owner / Agent