



File No. \_\_\_\_\_  
 Date Received \_\_\_\_\_  
 Roll No. \_\_\_\_\_

**TOWNSHIP OF NORWICH**  
**APPLICATION FOR ZONE CHANGE**

**1. Registered Owner (s)**

Name: \_\_\_\_\_ Phone: Residence: \_\_\_\_\_  
 Address: \_\_\_\_\_ Business: \_\_\_\_\_  
 \_\_\_\_\_ Fax: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant (if other than registered owner)**

Name: \_\_\_\_\_ Phone: Residence: \_\_\_\_\_  
 Address: \_\_\_\_\_ Business: \_\_\_\_\_  
 \_\_\_\_\_ Fax: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

**Solicitor or Agent (if any)**

Name: \_\_\_\_\_ Phone: Business: \_\_\_\_\_  
 Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
 \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

All communications will be sent to those listed above. If you do not wish correspondence to be sent to the  Owner,  Applicant, or  Solicitor / Agent, please check the appropriate box.

Name and address of any holders of any mortgages, charges or other encumbrances (if known):  
 \_\_\_\_\_

**2. Subject Land (s):**

Location:  
 Municipality \_\_\_\_\_ Former Municipality \_\_\_\_\_  
 Concession \_\_\_\_\_ Lot (s) \_\_\_\_\_  
 Registered Plan No. \_\_\_\_\_ Lot (s) \_\_\_\_\_  
 Reference Plan No. \_\_\_\_\_ Part (s) \_\_\_\_\_  
 The proposed lot is located on the \_\_\_\_\_ side of \_\_\_\_\_ Street/Road/Line,  
 lying between \_\_\_\_\_ Street/Road/Line and  
 \_\_\_\_\_ Street/Road/Line.  
 Street / Civic Address (911#) \_\_\_\_\_

**Official Plan Designation:**

Existing: \_\_\_\_\_  
 Proposed: \_\_\_\_\_

If the proposed designation is different than the existing designation, has an application for Official Plan amendment been filed with the County of Oxford?  Yes  No

B) If Applicant is the purchaser, or purchaser's agent, a copy of the Agreement of Purchase & Sale must be included with this application.

**Note:** A covering letter should be supplied with the application to describe the land use and business activity proposed

Zoning: Present: \_\_\_\_\_  
 Proposed: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Uses: Present: \_\_\_\_\_  
 Proposed: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**3. Buildings / Structures:**

For all buildings / structures, either existing or proposed on the subject lands, please supply the following information:  None Existing  None Proposed

Existing	Building 1	Building 2	Building 3
Use:	_____	_____	_____
Date Constructed:	_____	_____	_____
Floor Area:	_____	_____	_____
Setbacks:	_____	_____	_____
Front lot line	_____	_____	_____
Side lot line	_____	_____	_____
Rear lot line	_____	_____	_____
Height	_____	_____	_____

Proposed	Building 1	Building 2	Building 3
Use:	_____	_____	_____
Date Constructed:	_____	_____	_____
Floor Area:	_____	_____	_____
Setbacks:	_____	_____	_____
Front lot line	_____	_____	_____
Side lot line	_____	_____	_____
Rear lot line	_____	_____	_____
Height	_____	_____	_____

**4. Site Information** (proposed use(s)):

Lot Frontage	_____	Landscaped Open Space (%)	_____
Lot Depth	_____	No. of Parking Spaces	_____
Lot Area	_____	No. of Loading Spaces	_____
Lot Coverage	_____	Building Height	_____
Front Yard	_____	Width of Planting Strip	_____
Rear Yard	_____	Driveway Width	_____
Interior Side Yard (s)	_____	No. of Units	_____
Exterior Side Yard (corner lot)	_____		

**5. Services:** (check appropriate box)

	Existing	Proposed
<b>Water Supply</b>		
Publicly owned and operated piped water system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned & operated communal piped water system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned & operated individual well	<input type="checkbox"/>	<input type="checkbox"/>
Lake or other water body	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

		Existing	Proposed
<b>Sewage Disposal</b>	Publicly owned & operated sanitary sewer system	<input type="checkbox"/>	<input type="checkbox"/>
	Privately owned & operated communal septic system	<input type="checkbox"/>	<input type="checkbox"/>
	Privately owned & operated individual septic tank	<input type="checkbox"/>	<input type="checkbox"/>
	Pit Privy	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

- 6. Access:**
- |                                        |                          |                               |                          |
|----------------------------------------|--------------------------|-------------------------------|--------------------------|
| Provincial Highway                     | <input type="checkbox"/> | Unopened Road Allowance       | <input type="checkbox"/> |
| County Road                            | <input type="checkbox"/> | Right-of-Way (owned by) _____ | <input type="checkbox"/> |
| Municipal road (maintained year-round) | <input type="checkbox"/> | Water ACCESS (describe below) | <input type="checkbox"/> |
| Municipal road (seasonally maintained) | <input type="checkbox"/> | Other (specify)               | <input type="checkbox"/> |

If proposed access is by water, what boat docking and parking facilities are available on the mainland?

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**7. General Information:**

- I. Is the Subject Land the subject of regulations for flooding or fill and construction permits of a Conservation Authority?  Yes  No  
 Name of Conservation Authority: \_\_\_\_\_  
 Has an application been filed with the appropriate Conservation Authority?  Yes  No
- II. Present land use(s) of adjacent properties: \_\_\_\_\_
- III. Characteristics of subject land (check appropriate space(s) and add explanation, if necessary)  
 Is the land swampy or subject to seasonal wetness?  Yes  No  
 Is any part of the land used for agricultural purposes?  Yes  No  
 If Yes, describe type of crop, or operation and amount of land used: (include woodlots) \_\_\_\_\_
- 

**8. Historical Information:**

- I. Is the subject land the subject of a current Application for consent to the Oxford County Land Division Committee or a current application for draft plan of subdivision to the County of Oxford?  
 Yes  No Application No. \_\_\_\_\_
- II. Have the subject land(s) ever been the subject of any other application under the Planning Act, such as an application for approval of an official plan amendment, a zoning by-law amendment, a Minister's Zoning Order amendment, consent, minor variance or approval of a plan of subdivision?  
 No  Unknown  
 Yes File No. \_\_\_\_\_ Status/Decision \_\_\_\_\_
- III. If known, the date the subject land was acquired by the owner? \_\_\_\_\_
- IV. If known, the length of time that the existing uses of the subject land have continued? \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
 Signature of Owner/Applicant/Agent

If the applicant is not the owner of the land that is the subject of this application, the written authorization of the owner must be included with this form, or the authorization set out below must be completed. (See item 4 in the Zone Change Application Guide attached)

**Authorization of Owner(s) for Applicant/Agent to make the Application**

I/We, \_\_\_\_\_, am/are the owner(s) of the land that is the subject of this application for zone change and I/We authorize \_\_\_\_\_, to make this application on my/our behalf.

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

**THIS SECTION TO BE COMPLETED IN THE PRESENCE OF A COMMISSIONER FOR TAKING AFFIDAVITS**

I/We \_\_\_\_\_ of the \_\_\_\_\_  
Of \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_,

**DO SOLEMNLY DECLARE THAT:**

All of the prescribed information contained in this application is true and that the information contained in the documents that may accompany this application is 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 and by virtue of the **Canada Evidence Act**.

**DECLARED** before me at the \_\_\_\_\_ of \_\_\_\_\_ in the \_\_\_\_\_

Of \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_\_.

\_\_\_\_\_  
A Commissioner for Taking Affidavits

\_\_\_\_\_  
Owner(s) / Applicant

\_\_\_\_\_  
Owner(s) / Applicant

**NOTES**

- A. Where an Ontario Municipal Board hearing is required the applicant must assume the costs and responsibilities for the hearing as outlined in the Zone Change Application guide attached.
- B. Applications will not be considered complete until all required information has been supplied.
- C. It is required that **one original** and **fifteen copies** of this application be filed, together with the same number of copies of the sketch, accompanied by the applicable fee of \$450.00 payable to the Treasurer, Township of Norwich.

**SKETCH PLAN**

Use this page for sketch if survey plan is not available.

Return this sketch with application form.

**Without this sketch the application cannot be processed.**

Scale:

**KEY MAP**



A large, empty rectangular box intended for drawing a sketch plan or a key map.