



FOR OFFICE USE ONLY
Date Deemed Complete
File Number

Application for a County Official Plan Amendment under Section 22 of the Planning Act

NOTE TO APPLICANTS: This application form must be used for amendments to the County of Lennox & Addington Official Plan. In this form, the term 'subject land' means the land that is the subject of this application.

Completeness of Application:

All applicable information in this form must be provided by the applicant. This information is prescribed in the Schedule to Ontario Regulation 543/06 made under the **Planning Act**. The mandatory information must be provided with the appropriate fee. If the mandatory information, including the fee is not provided, the County will return the application or refuse to further consider the application until the prescribed information, and fee have been provided.

Prior to submitting this application to the County, pre-consultation with County Planning Department staff is mandatory in accordance with By-Law No. 3349/16. This process is utilized to determine which supporting studies or documentation, as outlined in the County Official Plan, will be required to be submitted with the application in order to deem the application 'complete'. If the appropriate studies or documentation are not submitted with the application, the application will be refused.

Submission of the Application:

The County requires:

- 5 copies of the completed application form;
- 5 copies of the survey and/or sketch (measurements to be in metric units), on 8 $\frac{1}{2}$ " x 14" paper if the amendment is site specific and is amending the land use description on a property;
- 5 hard copies and 1 digital copy of additional information or reports, if required; and,
- The applicable fee - as indicated on the County's Fee Schedule.

For Help

If you require help completing the application form, please contact the County of Lennox & Addington at 613-354-4883 ext 3234. Monday to Friday 8:30 a.m. - 4:30 p.m.

1. APPLICANT INFORMATION

1.1 Name of Owner(s) – Owner’s authorization is required if applicant is not the owner.

Name of Owner(s)	Home Phone	Business Phone
Address	Postal Code	Fax Number

1.2 Agent/Applicant – Name of the person who is to be contacted about the application, if different than the owner (this may be a person or firm acting on behalf of the owner).

Name of Owner(s)	Home Phone	Business Phone
Address	Postal Code	Fax Number

2. LOCATION OF THE SUBJECT LAND(S)

2.1 Complete the applicable information and boxes.

Local Municipality			
Concession No.	Lot Number(s)	Registered Plan No.	Lot(s)/Block(s)
Reference Plan No.	Part Number(s)	Name of Street/Road	Street Number

2.2 Total area of land covered by the proposed amendment, if applicable and if known:

2.3 Indicate how water will be provided to the subject property (municipal piped water system, private individual or communal well, lake, or by other means).

2.4 Indicate how sewage disposal will be provided to the subject property (municipal sanitary sewage system, private individual or communal septic system, privy, or by other means).

IMPORTANT: If the requested amendment would permit development on privately

owned and operated individual or communal septic system, and more than 4500 litres of effluent would be produced per day as a result of the development, please include a **servicing options report** and a **hydrogeological report**.

3. DETAILS OF THE PROPOSED OFFICIAL PLAN AMENDMENT

3.1 Does the amendment propose to (please indicate yes or no):

	Yes	No
4.1 Change, replace or delete a policy in the County Official Plan?	<input type="checkbox"/>	<input type="checkbox"/>
4.2 Add a policy to the County Official Plan?	<input type="checkbox"/>	<input type="checkbox"/>
4.3 Change or replace a land use category on Schedule A of the County Official Plan?	<input type="checkbox"/>	<input type="checkbox"/>

3.2 If the amendment request changes, replaces or deletes a policy, please identify the appropriate policy (by page and section number):

3.3 If the amendment request changes, replaces or deletes a policy **or** adds a policy, please indicate the purpose of the Official Plan amendment of the Official Plan amendment request (use additional sheets if necessary):

3.4 If a policy is being changed, replaced or deleted **or** if a policy is being added to the County Official Plan, indicate the text of the Official Plan Amendment request (use additional sheets if necessary):

3.5 What is the current designation of the subject land(s) in the County Official Plan and the land uses authorized by this category (if applicable):

3.6 If the amendment request changes or replaces a designation, please identify the designation to be changed or replaced **and** the purpose of such change:

3.7 Please provide the rationale/justification for the amendment request related to questions 8 to 13 on a separate sheet of paper.

3.8 What are the land uses which would be authorized by the Official Plan amendment request?

3.9 If the amendment request changes or replaces a schedule in the County Official Plan, please attach the proposed schedule to the back of this application.

3.10 If the amendment request changes all or any part of a settlement boundary, or establishes a new settlement area in a municipality, please describe the current Official Plan policies dealing with the alteration or establishment of a settlement area (attach a separate sheet if necessary):

3.11 If the amendment request removes the subject land from an area of employment, please describe the current Official Plan policies dealing with the removal of land from an area of employment (attach a separate sheet if necessary).

3.12 Is the requested amendment consistent with the Provincial Policy Statement? Please explain.

3.13 Is the subject property within an area of designated land under the provincial plan(s) as defined in Section 1 of the *Planning Act*? If yes, please explain whether this amendment conforms or does not conflict with the provincial plan(s).

3.14 Is the subject property or a portion of the subject property within a designated Vulnerable Area around the source of a municipal residential drinking water supply and subject to policy(s) in the applicable Source Water Protection Plan, developed under the *Clean Water Act*? If yes, please indicate if a Section 59 Notice is attached or explanation for not including this Notice.

3.15 Is the subject land(s), or **land(s)** within 120 metres of the subject land(s), the subject of any other application under the *Planning Act* (please indicate yes or no)?

	Yes	No
a) Application for approval of an Official Plan amendment:	<input type="checkbox"/>	<input type="checkbox"/>
b) Application for approval of a Zoning By-law amendment:	<input type="checkbox"/>	<input type="checkbox"/>
c) Minister's Zoning Order amendment:	<input type="checkbox"/>	<input type="checkbox"/>
d) Application for a Minor Variance:	<input type="checkbox"/>	<input type="checkbox"/>
e) Application for a Plan of Subdivision or Condominium:	<input type="checkbox"/>	<input type="checkbox"/>
f) Application for Consent:	<input type="checkbox"/>	<input type="checkbox"/>
g) Application for approval of a Site Plan:	<input type="checkbox"/>	<input type="checkbox"/>

3.16 If yes to any of the applications referred to in **Section 3.15**, and if known, please indicate:

3.16.1 The file number(s) of the application(s):

3.16.2 The name of the approval authority considering the application(s):

3.16.3 The lands affected by the application(s):

Local Municipality

Concession No.	Lot Number(s)	Registered Plan No.	Lot(s)/Block(s)
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Reference Plan No.	Part Number(s)	Name of Street/Road	Street Number
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3.16.4 The purpose of the application(s):

3.16.5 The status of the application(s):

3.16.6 The effect of the application(s) on the proposed amendment(s):

NOTE: IF MORE SPACE IS REQUIRED, PLEASE ATTACH THE REQUIRED INFORMATION TO THE BACK OF THIS APPLICATION.

4. AFFIDAVIT OF SWORN DECLARATION

I / We (applicant(s)) _____ of the (/Township/Town)
_____ of (Municipality Name) _____
solemnly declare that:

all the above statements and the information contained in all the exhibits transmitted herewith, are true and 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 and agree to allow the County of Lennox & Addington, its employees and agents to enter upon the subject property for the purposes of conducting surveys and tests that may be necessary to process this application.

I/we also agree to pay any additional funds required by the County for the processing of this application in accordance with the County Tariff of Fees By-law. Additional funds will not be required until the original application fee has been expended.

Sworn (or declared) before me

At the _____
In the _____
This _____ day of _____ 20_____.

Commissioner of Oaths

Applicant

PLEASE NOTE: *Personal information contained on this form is collected under the authority of Section 29(2) of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56 as amended and will be used to assist in the correct processing of the application. If you have any questions about the collection, use or disclosure of this information by the County of Lennox & Addington, please contact the CAO or Clerk, County of Lennox & Addington, 97 Thomas Street, Napanee, Ontario K7R 4B9 (613-354-4883).*