

RESIDENTIAL (HERITAGE) SITE PLAN APPROVAL APPLICATION

APPLICATION FOR SITE PLAN CONTROL AGREEMENT/EXEMPTION (SECTION 41 OF THE PLANNING ACT)

TO BE COMPLETED BY TOWN STAFF				Page 1 of 3
Application number: SPA-	R	E	Date received:	Fees received: <input type="checkbox"/> \$ _____

Application submitted to:

PLANNING SERVICES

Town of Whitchurch-Stouffville, 111 Sandiford Drive, Stouffville, ON L4A 0Z8

A. Project information				
Street name			Building/Unit number	
Lot & Concession		Postal code	Plan number/other description	
Lot Area (m ²)			Frontage (s) (m ²)	
B. Purpose of application				
<input type="checkbox"/> New House <input type="checkbox"/> Addition <input type="checkbox"/> Accessory Building <input type="checkbox"/> Non-residential building < 100m ²				
Description of proposed work				
Existing GFA (see Note)		Existing Footprint (see Note)		Existing Height (to midpoint of the roof)
Proposed GFA		Proposed Footprint		Proposed Height (to midpoint of the roof)
C. Applicant Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner				
Last name		First name	Corporation or partnership	
Street address			Unit number	Lot/con.
Municipality		Postal code	Province	E-mail
Telephone number ()		Fax ()		Cell number ()
D. Owner (if different from applicant)				
Last name		First name	Corporation or partnership	
Street address			Unit number	Lot/con.
Municipality		Postal code	Province	E-mail
Telephone number ()		Fax ()		Cell number ()

SPA -**E. Builder (optional)**

Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()	Cell number ()	

F. Site Questionnaire

1. Is the driveway being altered as part of the development proposal? Yes No
 Provide the width and length of the new/modified driveway: _____
 Specify the existing number of parking spaces: _____
 Specify the proposed number of parking spaces: _____

2. Does the proposed development include a new garage or modifications to existing garages? Yes No
 Provide the width and depth of the new/modified garage: _____
 Specify the existing number of parking spaces: _____
 Specify the Proposed number of parking spaces: _____

3. Is the amount of front yard landscaping being altered? Yes No
 Existing percent of the Front Yard that contains planting beds, shrubs and trees: _____
 Proposed percent of the Front Yard that contains planting beds, shrubs and trees: _____

4. Are any trees to be removed as part of the development proposal? Yes No

5. Is a fence to be erected as part of the development proposal? Yes No

6. Specify the existing cladding materials: _____
 Specify the proposed cladding materials: _____
 Photos Attached: Yes No

7. Is a second suite (eg. basement apartment) being proposed as part of the development proposal?
 Yes No

REQUIRED DRAWINGS – all drawings must be to scale

- i) SITE PLAN including location map, north arrow and existing and proposed landscape materials
- ii) FLOOR PLANS SHOWING EXISTING CONDITION
- iii) FLOOR PLANS SHWOING PROPOSED DEVELOPMENT
- iv) ELEVATIONS SHOWING EXISTING CONDITION
- v) ELEVATIONS SHOWING PROPOSED DEVELOPMENT
- vi) RENDERING OF PROPOSED DWELLING WITHIN THE STREETScape

I. Permission to Enter (Owner(s) to complete)

The applicant acknowledges that a site walk may be required in order to view the property and its relation to the surrounding lands, and in this regard authorizes members of Council (or a representative thereof), Town staff, Peer Review Consultants retained by the Town, and relevant External Agency Review Staff to enter onto the subject property for the purpose of evaluating the merits of the application.

Date: _____

Please print and sign name(s)

Signature / _____
Print

Signature / _____
Print

Note: Original signature(s) are required for the record. In the case of a corporation, the signature(s) must be that of an officer with authority to bind the corporation.

II. Authorization

I/We, (Owner) _____, hereby authorize (Agent/Applicant) _____ to submit the attached application to amend the Comprehensive Zoning By-law for the Town of Whitchurch-Stouffville, and to represent me/us in all matters with respect to the application.

Dated at the _____ of _____ this _____ day of _____ 20_____

Signature of Owner

Signature of Owner

Signature of Owner

III. Declaration of applicant

I _____ declare that:
(print name)

1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Date

Signature of Applicant

PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED UNDER THE AUTHORITY OF SECTION 41 OF THE PLANNING ACT AND WILL BE USED IN THE PROCESSING OF THE SITE PLAN CONTROL AGREEMENT. QUESTIONS CONCERNING THE PERSONAL INFORMATION REQUESTED SHOULD BE DIRECTED TO THE CLERK, TOWN OF WHITCHURCH-STOUFFVILLE, 111 SANDIFORD DRIVE, STOUFFVILLE, ON L4A 0Z8

Fees:

For current planning application fees, please refer to schedule "G" in the Town's Fees and Charges By-law