



## APPENDIX "B"

### TOWN OF TILLSONBURG SITE PLAN APPLICATION FORM

FILE NO. \_\_\_\_\_

REC'D: \_\_\_\_\_

DATE APPLICATION CONSIDERED \_\_\_\_\_

COMPLETE: \_\_\_\_\_

### TOWN OF TILLSONBURG SITE PLAN APPROVAL APPLICATION FORM

The undersigned hereby request the Town of Tillsonburg to consider a Site Plan Control application pursuant to Section 41 of the Planning Act on the lands hereinafter described.

#### Fees include:

#### Type of Site Plan Approval Application:

<ul style="list-style-type: none"><li>•2 Submissions</li><li>•Site Plan Approval Administration Fee (includes Registration on Title) - \$749.00</li><li>•Engineering Inspection Fee - \$237.00(x2)</li><li>•Oxford County Public Works Review Fee \$2,100.00 (Minor or Major) or \$1,050.00 (Amendment)</li><li>•Oxford County Water/Wastewater Modelling Fee - \$500.00</li><li>*Subsequent Submissions- \$749.00 each</li></ul>	<input type="checkbox"/> Amendment to Existing Site Plan Approval (\$3,522.00)
	<input type="checkbox"/> Amendment to Existing Site Plan Approval – After (\$4,271.00)
	<input type="checkbox"/> Minor Site Plan Approval Application (\$4,629.00)
	<input type="checkbox"/> Minor Site Plan Approval Application –After (\$5,435.00)
	<input type="checkbox"/> Major Site Plan Approval Application (\$5,597.00)
	<input type="checkbox"/> Major Site Plan Approval Application – After (\$7,371.00)

#### 1. BACKGROUND INFORMATION

##### a) Applicant/Agent:

Name \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Person E-mail: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

##### b) Registered Owner: (if other than applicant)

Name \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Person E-mail: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

##### c) Solicitor:

Name \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Person E-mail: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

**d) Location of Subject Land:**

Lot Number(s) \_\_\_\_\_ Plan No. or Concession \_\_\_\_\_

Part Number(s) \_\_\_\_\_ Reference Plan \_\_\_\_\_

Lot Number(s) \_\_\_\_\_ Registered Plan \_\_\_\_\_

Street Address (or 911 Number) \_\_\_\_\_

The subject land is located on the \_\_\_\_\_ side of the street between \_\_\_\_\_  
and \_\_\_\_\_.

Assessment Roll Number: \_\_\_\_\_

**e) Adjacent Lands:**

Does the Registered Owner own any adjacent lands or lands within 120 m of the subject  
lands? Yes (where) \_\_\_\_\_ No \_\_\_\_\_

**f) New Development \_\_\_\_\_ or Expansion of Existing Development \_\_\_\_\_**

If new, is any demolition of existing buildings on the site proposed? Yes \_\_\_ No \_\_\_

Are there previous site plan or development agreements registered against these lands?

Yes \_\_\_ (File no. \_\_\_\_\_) No \_\_\_

**g) Existing use of Subject property**

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**h) Proposed uses of land and buildings**

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**i) Official Plan Designation**

Schedule “\_\_\_-1” Land Use Plan \_\_\_\_\_

Schedule “\_\_\_-2” Residential Density Plan \_\_\_\_\_

Other Schedules and Appendices \_\_\_\_\_

If related to a recent or current Official Plan Amendment application, please indicate  
the: File No. \_\_\_\_\_ Status \_\_\_\_\_

**j) Zoning By-law**

Existing Zoning \_\_\_\_\_

Requested Zoning \_\_\_\_\_

If related to a recent or current Zone Change application, please indicate the

File No. \_\_\_\_\_ Status \_\_\_\_\_

**2. SITE INFORMATION**

**Note:** Under Parts 2(a) and 2(b) below, where the proposed dimension / feature does not meet the By-law regulation, a Minor Variance(s) or Zoning By-law Amendment will be required. A decision on the Site Plan application cannot be made without first securing approval of the required Minor Variance(s) or Zoning By-law Amendment.

<b>a) Zoning Provisions</b>	<b><u>REGULATION</u></b>	<b><u>PROPOSED</u></b>
	by Zoning By-law 3295	
Lot Frontage	_____	_____
Lot Depth	_____	_____
Lot Area	_____	_____
Lot Coverage	_____	_____
Front Yard	_____	_____
Rear Yard	_____	_____
Interior Side Yard	_____	_____
Exterior Side Yard (corner lot)	_____	_____
Landscaped Open Space (%)	_____	_____
No. of Parking Spaces	_____	_____
No. of Loading Spaces	_____	_____
Width of Planting Strip	_____	_____
Driveway Width	_____	_____
Handicap Spaces	_____	_____
	_____	_____

**Off-Street Parking and Loading Facilities**

Total number of off-street parking spaces existing: \_\_\_\_\_

Number of off-street parking spaces  
proposed (include existing & proposed): \_\_\_\_\_

Number of off-street loading  
facilities existing: \_\_\_\_\_

Number of off-street loading facilities  
proposed (include existing & proposed): \_\_\_\_\_

**b) Proposed Building Size:**

Ground Floor Area of Existing Buildings(s) \_\_\_\_\_

Ground Floor Area of Proposed Development \_\_\_\_\_

Total Ground Floor Area (including  
existing & proposed) \_\_\_\_\_

Number of Storeys proposed \_\_\_\_\_

Building Height Proposed \_\_\_\_\_

Total Gross Floor Area Proposed (including  
existing and proposed) \_\_\_\_\_

**3. COMPLETE AS APPLICABLE**

Note: If the application includes a combination of residential, commercial, industrial, institutional or open space development on the same site, the applicable sections must be completed.

**a) Multiple Family Residential**

Landscaped Area \_\_\_\_\_ m<sup>2</sup> (or ft<sup>2</sup>)

Conversion or Addition to Existing Residential Buildings Yes \_\_\_\_\_ No \_\_\_\_\_

Amenity and/or Children's Play Area Yes \_\_\_\_\_ No \_\_\_\_\_

***UNIT BREAKDOWN***

<i>Type</i>	<i>Number of Units</i>	<i>Floor area of Unit Type (m<sup>2</sup> or ft<sup>2</sup>)</i>
Bachelor	_____	_____
One-Bedroom	_____	_____
Two-Bedroom	_____	_____
Three-Bedroom	_____	_____

Other Facilities provided (e.g. play facilities, underground parking, games rooms, swimming pool, etc.) \_\_\_\_\_

**b) Commercial / Industrial Uses**

Describe Type of Business Proposed \_\_\_\_\_

No. of Buildings Proposed \_\_\_\_\_

Conversion or Addition to Existing Building \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, describe \_\_\_\_\_

Gross Floor Area (breakdown by type of use - office area, retail, storage etc.) \_\_\_\_\_

Seating Capacity (if applicable) \_\_\_\_\_

Number of employees - Initially \_\_\_\_\_ In future (5 yrs) \_\_\_\_\_

Open Storage Required      Yes\_\_\_ No \_\_\_\_\_

If yes, describe type, location, area m<sup>2</sup> (ft<sup>2</sup>) and buffering provided (if any) \_\_\_\_\_

\_\_\_\_\_

Phasing of development/construction if any \_\_\_\_\_

\_\_\_\_\_

If residential use proposed as part of, or accessory to commercial/industrial use, please complete Sec. 3 a).

**c)      Institutional, Open Space or Other Uses**

Proposed Use \_\_\_\_\_

No. of Beds (if applicable) \_\_\_\_\_

Gross Floor Area by Type of Use (office, common rooms, storage, etc.) \_\_\_\_\_

\_\_\_\_\_

Landscaped Area \_\_\_\_\_ m<sup>2</sup> (ft<sup>2</sup>).

#### 4. CHECKLIST TO ENSURE COMPLETE APPLICATION

In order to ensure applications for Site Plan Control are complete please complete the following checklist of the information to be provided on the site plan drawing.

- ☐ Site plan at a maximum scale of 1:200 and a minimum scale of 1:300.
- ☐ All measurements must be in metric.
- ☐ Location/key map at a 1:2000 scale with north arrow.
- ☐ Applicant's and owner's name, address and telephone number.
- ☐ Project name, municipal address and legal description (Lot and Plan number).
- ☐ Professional stamps- Originals
- ☐ Property dimensions certified by an Ontario Land Surveyor.
- ☐ Site Plan and Building Statistics:
  - ☐ Zoning Category / Symbol
  - ☐ Lot Area
  - ☐ Lot Coverage – proposed and permitted
  - ☐ Gross Floor Area – proposed and required
  - ☐ Gross Leasable area (if applicable)
  - ☐ Landscaped Open Space Area – proposed and required
  - ☐ Paved Area
  - ☐ Parking spaces – proposed and required
  - ☐ Loading spaces
  - ☐ Accessible parking spaces provided
- ☐ All bearings and dimensions of the property.
- ☐ Adjacent land uses, zoning and existing structures.
- ☐ Adjacent street names.
- ☐ Above ground utilities.
- ☐ Existing and proposed services.
- ☐ Existing municipal sidewalks.
- ☐ Dimensions of all buildings and structures.
- ☐ Building setbacks to lot lines and rights-of-way (including overhead canopies).
- ☐ Centre line setback of buildings from Arterial roads.
- ☐ Existing and proposed easements, rights-of-way and site triangles.
- ☐ Location and dimensions of required parking spaces, aisles & loading spaces.
- ☐ All vehicular entrances (widths and radii).
- ☐ Dimensioned landscape amenity areas.
- ☐ Existing and proposed grades around the perimeter of the site and critical points within site, including the base of existing trees to be preserved.
- ☐ Finished floor elevations of existing and proposed buildings.
- ☐ Retaining walls (top and bottom of wall spot elevations, material).
- ☐ Building entrances, including spot elevations at entrances to indicate flush thresholds,.
- ☐ Principle building entrance including nearest fire hydrant.
- ☐ Existing natural features and vegetation.
- ☐ Type and location of all hard surface areas – walkways, stairs, ramps.
- ☐ Garbage storage and handling areas.
- ☐ Snow removal and storage areas.
- ☐ Sign locations and heights.
- ☐ The location and turning radii for Fire and Emergency Service access route.
- ☐ Completed Appendix 'D' – Cost Estimates for Site Works and Services, if applicable.
- ☐ OBC Matrix

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Signature of Owner/Applicant

## 5. AUTHORIZATION

NOTE: The property owner or the authorized agent must complete the application. Where an agent is making the application, the written authorization of the owner must be completed below. If the application is being made under an agreement of purchase and sale, a copy of the agreement must be attached and will remain confidential.

### 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 site plan and I/we authorize \_\_\_\_\_, to make this application on my/our behalf.

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

\_\_\_\_\_  
DATED

**5. DECLARATION:**

I/We, \_\_\_\_\_ of the \_\_\_\_\_ of  
(Name) (Town/City)  
\_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_  
(Name of municipality) (County) (Name of County)

**DO SOLEMNLY DECLARE THAT:**

All of the statements contained in this application are 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.

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

DECLARED before me at the \_\_\_\_\_ of \_\_\_\_\_  
(Town/City) (Name of municipality)  
in the \_\_\_\_\_ of \_\_\_\_\_  
(County) (Name of County)  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
A Commissioner for Taking Affidavits, etc.