



**Town of Aurora**  
**Consent Application Form**

**Planning and Development Services**

**Development Planning Division**  
**Committee of Adjustment Section**

Phone: 905-727-3123 ext. 4226

Fax: 905-726-4736

Email: [planning@aurora.ca](mailto:planning@aurora.ca)



**Consent Application Form**

**For Office Use Only**

Application Received By:

Application File Number:

Date Received:

Assigned Application File Name:

Other Application Numbers on the Property:

Agency Notification Sent:

This Application Form is available in digital format on the Town’s Website under Planning and Development Services or contact [planning@aurora.ca](mailto:planning@aurora.ca) via e-mail or by calling 905-726-4700 for a copy. A processing fee in the amount specified on the Fee Calculation Worksheet shall be made payable to **The Town of Aurora (Cheque)** and must be submitted with this Application Form. Please note that this fee is **non-refundable** regardless of the outcome pertaining to this request. Planning Applications will not be accepted unless the full Application fee and required material is received.

The undersigned hereby applies to the Committee of Adjustment for the Town of Aurora under Section 53 of the *Planning Act*, for relief, as described in this Application Form, from the Town’s Comprehensive Zoning By-law (*as Amended*).

Applicants who wish to apply to the Committee of Adjustment must first have the Preliminary Zoning Review completed by the Building Division staff. To obtain information regarding this process, please contact [building@aurora.ca](mailto:building@aurora.ca) via e-mail or by calling 365-500-2081

**1. Complete Application**

When was the Pre-consultation meeting held with Town Staff?

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Which staff member(s) were in attendance?

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Comments

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## Consent Application Form

### 2. Preliminary Zoning Review

Has the Preliminary Zoning Review Form completed and attached?  Yes  No

Is the Application consistent with information provided in the Preliminary Zoning Review Form?

Yes  No

If not, you must speak to the Building Division staff directly.

### 3. Owner/Applicant/Agent Information

(Please list additional Property Owners on an attached schedule, if applicable)

**Registered Owner(s)** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

**Applicant(s)** \_\_\_\_\_

(If different than above)

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

**Agent(s):**

(Solicitor/Consultant, if applicable) \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_



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## Consent Application Form

### Send correspondence to:

(Check off the appropriate box)

- Owner       Applicant       Agent       All

### 4. Location and description of property

Legal Description of the subject land:

Municipal Address \_\_\_\_\_  
(If applicable)

Legal Description \_\_\_\_\_

Other \_\_\_\_\_

#### Size of Property

Area \_\_\_\_\_ (hectares) \_\_\_\_\_ (acres)

Frontage \_\_\_\_\_ (meters) \_\_\_\_\_ (feet)

Depth \_\_\_\_\_ (meters) \_\_\_\_\_ (feet)

### 5. Purpose of the application

Purpose of the proposed request. (Check off the appropriate box)

Creation of new lot

Addition to a lot

An easement or right of way

Other purpose (specify) \_\_\_\_\_

Other

A mortgage or charge

A lease

A validation of title



**Consent Application Form**

Number of newlots proposed (Not including retained lots) \_\_\_\_\_

For a lot addition, identify the lands to which the parcel will be added \_\_\_\_\_

Name of person(s), if known, to which land or interest in the land is intended to be transferred, leased or charged (i.e., purchaser, lessee, mortgagee, etc.) \_\_\_\_\_

**6. Description of lands intended to be severed / Subject of an easement /Other**

Area \_\_\_\_\_ (hectares) \_\_\_\_\_ (acres)

Frontage \_\_\_\_\_ (meters) \_\_\_\_\_ (feet)

Depth \_\_\_\_\_ (meters) \_\_\_\_\_ (feet)

Existing Use \_\_\_\_\_

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

Number and the use of the buildings and structures on the land to be severed (Both existing and proposed)

\_\_\_\_\_

**7. Description of land intended to be retained or residual lands**

Area \_\_\_\_\_ (hectares) \_\_\_\_\_ (acres)

Frontage \_\_\_\_\_ (meters) \_\_\_\_\_ (feet)

Depth \_\_\_\_\_ (meters) \_\_\_\_\_ (feet)

Existing Use \_\_\_\_\_

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



**Consent Application Form**

Number and the use of the buildings and structures on the land to be retained \_\_\_\_\_

**8. Existing easements / Restrictive covenants**

Are there any easements or restrictive covenants affecting the subject land?  Yes  No

If yes, describe the easement or covenant and its effect \_\_\_\_\_

**9. Parcel Abstract**

Submission of Parcel Abstract (PIN) for the property purchased from Ontario's Ministry of Government Services (showing deleted instruments) dated within 2 weeks of application submission

Yes  No

\*Please note, if parcel abstract (PIN) is not provided, Legal Services will charge a fee to obtain one on the applicant's behalf.

**10. Access**

Type of road access (check the appropriate box)

	Proposed Lot	Retained Lot
Provincial Highway	<input type="checkbox"/>	<input type="checkbox"/>
Regional Road, maintained all year	<input type="checkbox"/>	<input type="checkbox"/>
Municipal Road, maintained all year	<input type="checkbox"/>	<input type="checkbox"/>
Other Public Road	<input type="checkbox"/>	<input type="checkbox"/>



**Consent Application Form**

**11. Water supply**

Type of water supply (check the appropriate box)

	Proposed Lot	Retained Lot
Publicly owned and operated piped water system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated individual well	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated communal well	<input type="checkbox"/>	<input type="checkbox"/>
Lake or other body of water	<input type="checkbox"/>	<input type="checkbox"/>
Other means	<input type="checkbox"/>	<input type="checkbox"/>

**12. Sewage disposal**

Type of sewage disposal (check the appropriate box)

	Proposed Lot	Retained Lot
Publicly owned and operated sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated individual sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated communal sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Lake or other body of water	<input type="checkbox"/>	<input type="checkbox"/>
Other means	<input type="checkbox"/>	<input type="checkbox"/>

If a property is not municipally or publicly serviced, have you had the On-site Sewage System Form reviewed and completed by the Building Division staff?     Yes     No

If not, you are requested to contact the Building Division staff directly.



**Consent Application Form**

**13. Land use**

Use or Feature	On the Subject Land	Within 500 Metres of Subject Land, unless otherwise specified (indicate approximate distance)
An agricultural operation, including livestock facility or stockyard		
A landfill		
A sewage treatment plant or waste stabilization plant		
A provincially significant wetland (Class 1, 2 or 3 wetland)		
A Flood plain		
An industrial or commercial use, and specify the use(s)		
An active railway line		

**14. History of the property**

Has the subject lands ever been the subject of an Application of a Plan of Subdivision or a Consent under the Planning Act?  Yes  No  Unknown

If yes, and known, provide the Application File Number and the Decision made on the Application.

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Has any land been severed from the parcel originally acquired by the Owner of the subject land?

Yes  No

If Yes, and if known, provide for each parcel severed, the date of transfer, the name of the transferee and the land use.

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## Consent Application Form

### 15. Other current applications

Are the applicable lands the subject of an Application for a proposed Official Plan Amendment, Zoning By-law Amendment, Minor Variance, Consent, Approval of a Plan of Subdivision or other land development Application pursuant to the Planning Act.  Yes  No

If yes, specify the Application File Number and status of the Application \_\_\_\_\_

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### 16. Survey of the property

The Application Form shall be accompanied by a survey drawn to a standard metric scale, showing the following:

- a) The boundaries and dimensions of any land abutting the subject land that is owned by the Owner of the subject land;
- b) The distance between the subject land and the nearest Township lot line or landmark such as a bridge or railway crossing;
- c) The boundaries and dimensions of the severed land, and the land to be retained;
- d) The location of all land previously conveyed from the parcel originally acquired by the current Owner of the subject land;
- e) The approximate location of all natural and artificial features on the subject lands and on the land that is adjacent to the subject land that, in the opinion of the Applicant may affect the Application, such as buildings, railways, roads, watercourses, drainage ditches, rivers or stream banks, wetlands, wooded areas, wells, septic tanks, and tile fields;
- f) The existing uses on adjacent land, such as residential, agricultural, and commercial;
- g) The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road or a right-of-way;
- h) If access to the subject land is by water only, the location of the parking and boat docking facilities to be used; and
- i) The location and nature of any easement affecting the subject land.

### 17. Fee calculation worksheet

Are the applicable fees attached?  Yes  No

Is the Fee Calculation Worksheet completed and attached?  Yes  No



**Consent Application Form**

**Affidavit**

I/We	of the Municipality of
In the Region of	
solemnly declare that all the statements contained in this Application Form 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 <i>The Canada Evidence Act</i> .	
SWORN before me at the(City/Town)	of(Municipality)
in the (Region, if Applicable)	of
This	day of , 20
Owner/Agent or Applicant	
Commissioner for Taking Affidavits, etc.	



**Consent Application Form**

**Authorization of Owner**

I/We,	
Hereby authorize (Name of Agent or person authorized to sign this Application Form)	
to act as our Agent to sign this Application Form, to appear on my/our behalf at any hearing(s) in respect of the Application and to provide any information or material required by the Town in connection with this Application Form and I/We hereby authorize the Town to collect such information from my/our Agent.	
Address	
Legal Description	
Signature(s) of Owner(s)	
Name of corporation	
Name	Title
Dated this        day of        , 20	
Signing Officer Signature and Corporation seals, if applicable	
Per Name of corporation	
Name	Title
I/We have the authority to bind the corporation	



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**Consent Application Form**

**Declaration of site plan**

I,

with respect to the Site Plan submitted with this Consent Application hereby declare that (please select one of the following):

Where the Site Plan is a photocopy of a survey, I am the Owner of the copyright in the survey and hereby authorize the Town of Aurora to circulate this site plan;

The Site Plan of the property submitted by myself contains siting information provided by me and does not violate copyright in any survey related to the property which is the subject of this ApplicationForm.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature of Owner/Applicant or Agent



**Consent Application Form**

**Sign posting affidavit**

In the matter of the following Application(s) to the Town of Aurora Committee of Adjustment,	
Consent Application Number	
Last day for Posting Sign	
I/We	
hereby confirm that the required sign has been posted on the subject property in a prominent location	
at (Property Location/Address)	
on (Date of Posting)	
I did cause the Notice(s) of the Applicant(s) provided to me (the Applicant as the case may be) by the Secretary-Treasurer of the Committee of Adjustment of the Town of Aurora to be posted so as to be clearly visible and legible from a public highway, or other place to which the public has access on the subject land of the Application(s) or, where posting on the property was impractical, at a nearby location so as to adequately indicate to the public what property is the subject of the Application(s), in compliance with the <i>Planning Act</i> , R.S.O. 1990, c. P. 13, as amended.	
SWORN before me at the(City/Town)	of(Municipality)
in the (Region if Applicable)	of
This	day of , 20
Owner/Agent or Applicant	
Commissioner for Taking Affidavits, etc.	

## Public record notice and release

**Public Record Notice:** Pursuant to the section 1.0.1 of the *Planning Act*, R.S.O. 1990, c. P.13, all information and material required in support of your Application Form will be made available to the public.

I understand and agree that my personal information, as well as any other information and material including, but not limited to, drawings, studies, plans, affidavits, etc., provided on this Application Form and/or required as part of this Application Form, will be used to create a record that is available to the general public and I do hereby authorize and consent to the release, disclosure, copying and distribution of any such information and/or material to any person or public body.

I also understand and agree that The Corporation of the Town of Aurora (*the "Town"*) is not responsible for protecting and/or enforcing copyrights or any other intellectual property rights that might attach to any information or material provided or submitted as part of this Application Form.

By signing below, I agree to the foregoing and I also agree to release, waive and forever discharge the Town from all actions, claims, demands, losses, costs, damages, suits, proceedings or liabilities whatsoever related to: (a) the collection, handling and release of any information provided on this form and/or required as part of this Application Form; and (b) any copyright or intellectual property rights that might attach to any information or material submitted as part of this Application Form and made available to the public by the Town pursuant to section 1.0.1 of the *Planning Act*.

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Signature of Owner/Applicant or Agent

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Date



100 John West Way  
Aurora, Ontario  
L4G 6J1  
(905) 726-4700  
aurora.ca

Town of Aurora

# Fee Calculation Worksheet

Planning and Development Services

## Committee of Adjustment Applications

This Form must be completed by Applicant for calculation of fees.

For the Application file to be complete, the required Application Fee must be paid in **full** before any processing of the Application will commence.

Breakdown of Fees		
Calculations	Fee	Total
Consent		
Base Fee	\$ 5,555.00	\$ _____
Plus:		
Fee per additional lot created	\$ 2,790.00	\$ _____
Plus. if applicable:		
Change of conditions (Section 53(23) of the Planning Act—only before final consent is given)	\$ 1,023.00	\$ _____
Re-circulation Fee (Note 7)	\$ 2,910.00	\$ _____
<b>Total Consent Application Fee</b>		<b>\$ _____</b>
Minor Variance or Permission		
a) Oak Ridges Moraine Residential	\$ 2,563.00	\$ _____
b) Ground related Residential zoned lands	\$ 3,068.00	\$ _____
c) More than one Variance related to Draft Approved Plan of Subdivision	\$ 3,068.00	\$ _____
d) All other uses, including ICI (Additional Fee)	\$ 3,760.00	\$ _____
e) Minor Variance for Swim Schools	\$ 267.00	\$ _____
f) Minor Variance (non-owner occupied)	\$4,896.00	\$ _____
Plus, if Applicable:		
Additional fee per lot / unit	\$ 1,608.00	\$ _____
Re-circulation / Revisions Fee (Note 7)	\$ 1,543.00	\$ _____
Note 7: Recirculation Fees: Required due to an Owner's or Applicant's revisions or deferrals.		
<b>Total Minor Variance Application Fee</b>		<b>\$ _____</b>
<b>Total Fee Amount</b>		<b>\$ _____</b>

### Staff use only

File Name: \_\_\_\_\_ File Number: \_\_\_\_\_

Property Address / Legal Description: \_\_\_\_\_

Official Plan General Ledger Number 1-3-08101-1107 (COAAP)

Verification of Fees:

Indicate Correct Total \$ \_\_\_\_\_

Staff Name: \_\_\_\_\_ Date: \_\_\_\_\_