

Town of Aurora

Minor Variance Application Form

Planning and Development Services

Development Planning Division Committee of Adjustment Section

> Phone: 905-726-4700 Fax: 905-726-4736 Email: <u>planning@aurora.ca</u>

Town of Aurora 100 John West Way, Box 1000, Aurora, ON L4G 6J1 www.aurora.ca

January 2024



This Application Form is available in digital format on the Town's Website under Planning and Development Services or contact 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).** The fee must be delivered to Planning and Development Services at Town Hall located on the 3rd floor, quoting the address of the proposed development. 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 via e-mail or by calling 365-500-2081

1. Complete Application

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

Which staff member(s) were in attendance?
Comments
 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			
		Postal Code	
		E-mail	
Applicant(s) (If different than above)			
Address			
City	Province	Postal Code	
Telephone	_Fax	E-mail	
Agent(s): (Solicitor/Consultant, if applical	ole)		
Contact			
Address			
City	Province	Postal Code	
Telephone	_Fax	E-mail	
Send correspondence to:			
(Check off the appropriate box)	cant Agent	All	



Location and description of property Legal Description of the subject land: 4.

Municipal Address (If applicable)			
Legal Description _			
Other			
Size of Property			
Area	(hectares)	(acres)	
Frontage	(meters)	(feet)	
Depth	(meters)	(feet)	
5. Nature and e	extent of relief from the 2	Zoning By-law applied for	
6. Why is it not	possible to comply with	the provisions of the By-law	



7. Subject lands

Particulars of all existing building(s) and structure(s) on the subject land. Please specify:				
	Existing struc	ture 1	Existing structure 2	
a) Type of building(s) or structure(s)				
b) Gross floor area or dimensions of the building(s) or structure(s)				
c) The front, rear and side yard setbacks	Front:	Rear:	Front:	Rear:
	Side:	(Ext.) Side:	Side:	(Ext.) Side:
d) Height of the building or structure		•		
e) Location of parking				



Particulars of all proposed building(s) and structure(s) on the subject land. Please specify:				
	Proposed structure 1		Proposed struct	ure 2
a) Type of building(s) or structure(s)				
b) Gross floor area or dimensions of the building(s) or structure(s)				
c) The front, rear and side yard setbacks	Front:	Rear:	Front:	Rear:
	Side:	(Ext.) Side:	Side:	(Ext.) Side:
d) Height of the building or structure				
e) Location of parking				

Note: The Applicant must submit a Site Plan, together with any photographs or drawings (such as floor plans or elevation plans) which may assist the Committee, if applicable.

Year of acquisition of subject land ______

Year of construction of all buildings and structures on subject land ______

Existing use of the subject pr	operty	
Existing use of the subject pr	operty	

Proposed use of the subject property _____

Existing use of the abutting properties _____

Length of time the existing uses of the subject property have continued ______



8. Existing easements / Restrictive covenants		
Are there any easements or restrictive covenants affecting th	ne subject land?	Yes No
If yes, describe the easement or covenant and its effect		

9. Access

Type of road access (check the appropriate box)

____ Provincial Highway

____ Regional Road, maintained all year

____Another public road or right-of-way

10. Water Supply

Water supply provided by (check the appropriate box)

Publicly owned and operated piped water

Privately owned and operated individual well

Privately owned and operated communal well Lake

____ or other body of water

___Other means

11. Sewage Disposal

Sewage disposal provided by (check the appropriate box)

- Publicly owned and operated sanitary sewage system Privately
- owned and operated individual sewage system Privately
- owned and operated communal septic system

Other means



12. Stormwater Management

Storm Drainage provided by (check the appropriate box)

	Sewers
	Ditches

Swales

Other means

If the property is not municipally or publicly serviced, have you had the On-site Sewage System Form

No

reviewed and completed by the Building Division staff:

If no, you are required to contact the Building Division Directly.

13. 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 lands;
- b) The location, size and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the front yard lot line, rear yard and the side yard lot lines;
- c) 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;
- d) The current uses on land that is adjacent to the subject land;
- e) 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 right-of-way;
- f) If access to the subject land is by water only, the location of the parking and boat docking facilities to be used; and
- g) The location and nature of any easement affecting the subject land.

14. Fee calculation worksheet

Are the applicable fees attached?	Yes	No			
Is the Fee Calculation Worksheet c	completed and	d attached?	Yes	No	
Comment					



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 meat the (City/Town)	of(Municipality)		
in the (Region, if Applicable)	of		
This day of , 20			
Owner/Agent or Applicant			
Commissioner for Taking Affidavits, etc.			



Authorization of Owner(s)

l/We,			
under the Planning Act, R.S. to enter upon the land sub	prize representatives of the Town of Aurora and those persons identified S.O. 1990 c. P.13, including the Members of the Committee of Adjustment, ject to this application for the purpose of conducting any site inspections necessary for the evaluation of this application.		
Signature(s) of Owner(s)			
l/We,			
Hereby authorize (Name of	Agent or person authorized to sign this Application Form)		
respect of the Application	n this Application Form, to appear on my/our behalf at any hearing(s) in a and to provide any information or material required by the Town in ation Form and I/We hereby authorize the Town to collect such information		
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			



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 and hereby authorize the Town of Au			
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 Application Form.				
Dated th	is day of	20		
Signature of Owner/Applicant or Agent				



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

l/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 *Planning Act*, R.S.O. 1990, c. P. 13, as amended.

SWORN before meat the (City/Town)

of(Municipality)

of

in the (Region if Applicable)

day of

This

, 20

Owner/Agent or Applicant

Commissioner for Taking Affidavits, etc.



Public record notice and release

Public Record Notice: Pursuant to 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*.

Signature of Owner/Applicant or Agent

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 the Applicant for the calculation of fees.

Note 8: Minor Variance applications for non-owner occupied. Total Minor Variance Application Fee Total Fee Amounts Payment of Fees All fees set out herein shall be payable by cheque to the Town of Aurora upon the submission of this application. For the Application to be complete, the required Application Fee must be paid in full and delivered to the Town before any processing of the Application commences. Staff use only File Name: File Number: Committee of Adjustment General Ledger Number 1-10-1093-52107-000000-000-0000 (COAAP) Verification of Fees: Indicate Correct Total \$	Breakdown of Fees			
a) Base Fee (for all Consent types) \$ 5,777.00 \$	Calculations	Fee	Total	
Plus: Fee per additional lot created (beyond the initial severed parcel) \$ 2,902.00 \$	Consent			
severed parcel) \$ 2,902.00 \$	Plus:		\$	
c) (Section 53(23) of the Planning Act- only before final consent is given) \$1,1004.00 \$ c) Re-circulation Fee (were 7) \$3,026.00 \$ Total Consent Application Fee \$ \$ Minor Variance or Permission \$2,666.00 \$ \$ a) Oak Ridges Moraine Residential \$3,191.00 \$ \$ b) Ground related Residential zoned lands \$3,191.00 \$ \$ c) More than one Variance related to a Draft Approved Plan of Subdivision (plus per let or unit calculation per the below) \$3,910.00 \$ \$ d) All other uses, including ICI \$ 278.00 \$ \$ e) Minor Variance for Outdoor Swim Schools \$5,092.00 \$ \$ \$ g) Re-circulation / Revisions Fee (were 7) \$1,605.00 \$ \$ \$ g) Re-circulation Fees: Required due to an Owner's or Applicatios or deferrals. Note 8: Minor Variance Applications for non-owner occupied. Total Fee Amounts \$ \$ \$ \$ Total Fee Amounts \$ \$ \$ \$ \$ \$ \$ \$ \$ <td>severed parcel)</td> <td></td> <td>\$</td>	severed parcel)		\$	
Total Consent Application Fee \$		\$ 1, 064.00	\$	
Minor Variance or Permission \$ 2,666.00 \$	c) Re-circulation Fee (Note 7)	\$ 3,026.00	\$	
a) Oak Ridges Moraine Residential \$ 3,191.00 \$	Total Consent Application Fee		\$	
b) Ground related Residential zoned lands \$3,191.00 \$	Minor Variance or Permission	\$ 2,666.00	\$	
c) More than one Variance related to a Draft Approved Plan of Subdivision (plus per lot or unit calculation per the below) \$ 3,910.00 \$	a) Oak Ridges Moraine Residential	\$ 3,191.00	\$	
Plan of Subdivision (plus per lot or unit calculation per the below) \$ 3,910.00 \$	b) Ground related Residential zoned lands	\$ 3,191.00	\$	
e) Minor Variance for Outdoor Swim Schools \$ 5,092.00 \$,	<u> </u>	\$	
f) Minor Variance (non-owner occupied) (Note 8) \$ 1,672.00 \$	d) All other uses, including ICI	\$ 278.00	\$	
g) Re-circulation / Revisions Fee (Note 7) \$ 1,605.00 \$	e) Minor Variance for Outdoor Swim Schools	\$ 5,092.00	\$	
Note 7: Recirculation Fees: Required due to an Owner's or Applicant's revisions or deferrals. Note 8: Minor Variance applications for non-owner occupied. Total Minor Variance Application Fee \$	f) Minor Variance (non-owner occupied) (Note 8)	\$ 1,672.00	\$	
Note 8: Minor Variance applications for non-owner occupied. Total Minor Variance Application Fee Total Fee Amounts Payment of Fees All fees set out herein shall be payable by cheque to the Town of Aurora upon the submission of this application. For the Application to be complete, the required Application Fee must be paid in full and delivered to the Town before any processing of the Application commences. Staff use only File Name: File Number: Committee of Adjustment General Ledger Number 1-10-1093-52107-000000-000-0000 (COAAP) Verification of Fees: Indicate Correct Total \$	g) Re-circulation / Revisions Fee (Note 7)	\$ 1,605.00	\$	
Total Fee Amounts \$	Note 7: Recirculation Fees: Required due to an Owner's or Applicant's revisions or deferrals. Note 8: Minor Variance applications for non-owner occupied.			
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of this application. For the Application to be complete, the required Application Fee must be paid in full and delivered to the Town before any processing of the Application commences. Staff use only File Name:	Payment of Fees			
File Name: Property Address / Legal Description: Committee of Adjustment General Ledger Number 1-10-1093-52107-000000-000-0000 (COAAP) Verification of Fees: Indicate Correct Total	of this application. For the Application to be complete, the required Application Fee must be paid in full and delivered to the Town before any processing of the Application commences.			
Property Address / Legal Description: Committee of Adjustment General Ledger Number 1-10-1093-52107-000000-000-0000 (COAAP) Verification of Fees: Indicate Correct Total \$				
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Verification of Fees: Indicate Correct Total \$	Committee of Adjustment General Ledger Number			
Indicate Correct Total \$	1-10-1093-52107-000000-000-000-0000 (COAAP)			
Staff Name: Date:			\$	
	Staff Name:	Date:		