

Application No	) <b>.</b>

## Application For Plan Of Subdivision or Condominium Town Of Essex

ivame	of approval auth	ority	County of Essex
Date	application receiv	ed by munic	ipality
Date	application deem	ed complete	by municipality
Name	of Registered Ow	/ner	
Telep	hone number		
Addre	ess		
Email			
	of Registered Ow thorized Agent (if		or
Telep	hone number		
Addre	255		
Email			
Please	e specify to whom	all commun	ications should be sent:
	☐ Registered	Owner	☐ Solicitor ☐ Agen
Locat	ion and description	on of subject	land:
Conce	ession No		Lot No(s).
Regis	tered Plan No		Lot No(s).
Refer	ence Plan No		Part No(s).
Street	: Address		Assessment Roll No(s)
Size o	f subject land:		
Front	age	Depth	Area
Are th	iere any easemen	ts or restricti	ve covenants affecting the subject land?
		<b>l</b> yes	□ no
	_	_ ,	

8.	under Se	Has the parcel ever been the subject of an application for subdivision approval under Section 51 or for a previous consent under Section 53 of the planning Act, as amended?						
			yes	□ no				
	If yes, ple	ease indicate the	file number(s) a	nd the decisi	on(s):			
9.	Current (	Official Plan Lanc	d Use designation	n of subject la	ands			
10.	Please provide the following information pertaining to the draft plan of subdivision:							
		Number. of units or dwellings	Number. of Lots or Blocks	Area in Hectares	Units per Hectare	Number of Parking spaces		
Resid Dwell	ential lings							
Single Detac Dwell	hed							
Semi- Detac Dwell	hed							
Multip Dwell Attac	lings							
Apart Dwell								
Seaso Dwell								
Mobil Dwell	le Home lings							
Other Resid Dwell	ential							
Sub-t	total							
Non- Resid Dwell								

N/A

N/A

Commercial

Institutional

Other Uses

**Sub-total** 

Total

Industrial

Roads

11.	If one the proposed uses referred to in Item 10 above is identified as "Other Residential", "Institutional" and/or "Other Use", please describe the use(s) below						
	"Other Residential"						
	"Institutional"						
	"Other Use"						
12.	Access to subject parcel:						
	<ul><li>☐ Municipal Road</li><li>☐ County Road</li><li>☐ Provincial Highway</li><li>☐ Water</li></ul>						
	If access to the subject land is by water only, state the parking and docking facilities used or to be used and the approximate distance between these facilities and the nearest public road						
13.	Type of water supply:						
	☐ municipally owned and operated piped water supply						
	☐ well						
	☐ Other (specify)						
14.	Type of sanitary sewage disposal:						
	☐ municipally owned and operated sanitary sewers						
	☐ septic system						
	☐ Other (specify)						
15.	Type of storm drainage:						
	☐ sewers						
	☐ ditches						
	☐ swales						
	☐ Other (specify)						
16.	Please indicate whether the property is the subject of any other Planning Act application(s):						
	☐ Official Plan Amendment						
	☐ Zoning By-law Amendment						
	☐ Minor Variance						
	☐ Consent						
	☐ Site Plan Control						
	If known, indicate the file number(s) and status of the foregoing application(s):						

## Plan of Condominium Approval

17.	Has a site plan for the proposed condominium been approved and a site plan agreement been entered into?					nd a site plan		
			yes	Ţ	_	no		
18.	Has a building permi	Has a building permit for the proposed condominium been issued?						
			yes	Ţ	<b>_</b>	no		
19.	Is the proposed cond	lomi	nium:					
	Under construction?		yes	Ţ	ב	no		
	Completed?		yes	Į	ם	no		
20.	If the proposed cond completion?	omi	nium has	been com	ple	eted, what was the	e date of	
	Date	_						
21.	Is the proposed condrental units?	dom	inium a co	onversion	of	a building contair	ing residential	
			yes	Ţ	_	no		
	Number of units to b	e co	nverted _					
	d at the	_of			this	s day of		
			Signa	ture of ap	pli	cant, solicitor or au	uthorized agent)	
decla solen	of the of	nts c ntiou	ontained isly believ	in this app ing it to b	olic e t	cation are true, and rue, and knowing	I I make this that it is of the	
Decla	ared before me at the _			of		in the		
of	this			day of _		, 20	·	
				-	4 C	ommissioner, etc.		

## **Authorization**

(\*Please see note below)

To:	Clerk	Clerk								
	Towr	Town of Essex								
	Desc	Description, Address and Location of Subject Lands:								
	auth	•	of	he registered owner(s) of the above lands hereby of the of						
	(1)	(1) make an application on my/our behalf to the Council for the Town of Essex;								
	(2)	appear on my behalf at any hearing(s) of the application; and								
	(3)	provide any information or material required by Town Council relevant to the application.								
Date	d at the	e of	of , this	day of	in the , 20					
Signa	ature of	Witness		Signature of O	wner					
Signature of Witness				Signature of O	wner					
Signa	ature of	Witness		Signature of O	wner					
* Note: This form is only to be use someone other than the content is a someone of the someone other.				pplications which	are to be signed by					