



## SITE PLAN CONTROL

### APPLICATION FORM

Roll No.: 23-41-000-0\_\_\_\_\_ -0000

Date: DD / MM / YY

The undersigned hereby applies to the Council of the Town of Minto for approval under section 41 of the Planning Act, R.S.O. 1990, c. P. 13 of the following:

1. Legal description of property:  
 Lot No.: \_\_\_\_\_ Civic No.: \_\_\_\_\_ Plan/Concession No.: \_\_\_\_\_  
 Street No.: \_\_\_\_\_ Street Name: \_\_\_\_\_  
 Frontage: \_\_\_\_\_ m / ft Depth: \_\_\_\_\_ m / ft Area: \_\_\_\_\_ m<sup>2</sup> / ft<sup>2</sup>
2. Owner's Name: \_\_\_\_\_  
 Owner's Address: \_\_\_\_\_  
 Telephone No.: ( ) - Cell Phone No.: ( ) - Fax No.: ( ) -
3. If Applicant is other than the owner:  
 Applicant's Name: \_\_\_\_\_  
 Applicant's Address: \_\_\_\_\_  
 Telephone No.: ( ) - Cell Phone No.: ( ) - Fax No.: ( ) -
4. Current Zoning of Property: \_\_\_\_\_  
 Current Use of Property: \_\_\_\_\_  
 Proposed Use of Property: \_\_\_\_\_  
 Current Use of Building: \_\_\_\_\_  
 Proposed Use of Building: \_\_\_\_\_
5. If a building or an addition is proposed, give:  
 Width: \_\_\_\_\_ m / ft Length: \_\_\_\_\_ m / ft Height: \_\_\_\_\_ m / ft Area: \_\_\_\_\_ m<sup>2</sup> / ft<sup>2</sup>  
 Distance Back from Street Line: \_\_\_\_\_ m / ft  
 Distance from Side Lot Lines: \_\_\_\_\_ m / ft  
 Distance from Rear Lot Line: \_\_\_\_\_ m / ft
6. If parking is provided, give total amount of parking spaces proposed:  
 Typical Parking Spaces (9'-0" x 18'-0"): \_\_\_\_\_  
 Handicap Parking Spaces (13'-0" x 18'-0"): \_\_\_\_\_
7. The applicant submits with the application fee in the amount of \$\_\_\_\_\_. No assurance is given that the payment of the fee will result in approval. The application will be processed according to the policy of council.
8. Six copies of the Site Plan are to be submitted with this application.

I hereby consent to this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner  
(where applicant is not the owner)

**For Office Use Only**

I hereby approve The Site Plan Application

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Amount Received: \$\_\_\_\_\_

Receipt No.: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

# SITE PLAN CONTROL

## CHECKLIST

Roll No.: 23-41-000-0\_\_\_\_\_ -0000

Applicant: \_\_\_\_\_

Date: DD / MM / YY

	<u>Required</u>	<u>Provided</u>
Lot Area	_____	_____
Lot Width	_____	_____
Front Yard	_____	_____
Exterior Side Yard	_____	_____
Interior Side Yard	_____	_____
Rear Yard	_____	_____
Building Height	_____	_____
Parking Spaces	_____	_____
Planting Strips	_____	
Building Elevations	_____	
Drainage Pattern	_____	
Storm Drainage	_____	
Culverts and Size	_____	
Road Widening	_____	
Access Ramps	_____	
Curbs	_____	
Traffic Pattern Signs	_____	
Loading Facilities	_____	
Parking Lot Surface	_____	
Pedestrian Walkways	_____	
Flood Lighting	_____	
Landscaping	_____	
Storage for Garbage	_____	
Easement Required	_____	