

APPENDIX A

Severance Application

- Site Plan Drawing
- Well record for 718129
- Well record for 718105



Township of Georgian Bluffs Committee of Adjustment

Severance Application

Date Accepted: _____ File No: B _____ / _____ Roll #: _____

Note: Questions 2, 3, 6, 7, 8, 9, 10, 11, 12 a & b, & 14 are **minimum mandatory requirements** as prescribed in the schedule to Ontario Regulation 41/95, Planning Act, and **must be completed**. The remaining questions assist the Committee and Agencies in evaluating your application. You can help ensure a thorough evaluation is completed by answering all questions. Failure to provide adequate, correct information may result in your application being refused.

1. Approval Authority: The Township of Georgian Bluffs Committee of Adjustment
2. Owner: _____ John and Pat Johnston _____
Address: _____ 718129 Hwy 6 Owen Sound, On _____
Phone Number: _____ (519) 371 5849 _____ Postal Code: _____ N4K 5N7 _____
Email: _____ osjamm@bmts.com _____
3. Applicant (if different from Owner): _____
Address: _____
Phone Number: _____ Postal Code: _____
Email: _____
4. Agent/Solicitor: _____ Text _____
Address: _____
Phone Number: _____ Postal Code: _____
Email: _____
5. Communications should be sent to:
 Owner Applicant/Authorized Agent Solicitor Other: _____

Note: In this form, "Subject Land" means the parcel to be severed and the parcel to be retained

6. Subject Land:

Legal Description: _____ Con. 2 SCD West Part of Lot 1 _____

Former Municipality: _____ Township of Keppel _____

Civic Addressing Number: _____ 718129 Hwy 6 Owen Sound Ontario N4K 5N7 _____

7. Description of Subject Land:

a) **Existing** use of Subject Land: Residential/Family Recreation

b) **Existing** Buildings: Single Family Dwelling and Barn

c) Is the Subject Land presently subject to **any** of the following:

Easement Restrictive Covenants Right of Way

Note: All existing easements and right of ways must be shown on the sketch.

8. Proposal: (Dimensions must be accurate)

Dimensions of land intended
to be **severed**

Frontage 108 metres

Depth: Side Lot Line 166 metres

Width: Rear Lot Line 108 metres

Area 1.8 hectares

Dimensions of land intended
to be **retained**

Frontage 200 metres

Depth: Side Lot Line 880 metres

Width: Rear Lot Line 433 metres

Area 34 Acres *hectares*

9. Use of Subject Land to be **severed**:

- New Lot
- Lot Addition
- Lease/Charge
- Easement/Right of Way
- Correction of Title

Name of person(s), if known, to whom land or interest in land is to be transferred, leased or charged:

Address: 718129 Hwy 6 Owen Sound Ontario

Buildings Proposed: Single Family Residential retirement Dwelling

10. Use of Lands to be **retained**:

Buildings Proposed: None

Specify Use: Residential/ Family Recreation

11. Road Access	Severed Parcel	Retained Parcel
Provincial Highway	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
County Road (Provide Road Number)	<input type="checkbox"/>	<input type="checkbox"/>
Township Road	<input type="checkbox"/>	<input type="checkbox"/>
Non-maintained/seasonally maintained	<input type="checkbox"/>	<input type="checkbox"/>
Municipal road allowance	<input type="checkbox"/>	<input type="checkbox"/>
Private Right-of-Way	<input type="checkbox"/>	<input type="checkbox"/>

Note: If access is from a non-maintained or seasonally maintained road allowance, has an agreement been reached with the Municipality regarding upgrading of the road?

Yes No

12. Servicing

a) What type of **water supply** is proposed?

	Severed Parcel	Retained Parcel
Municipally owned/operated	<input type="checkbox"/>	<input type="checkbox"/>
Lake/River	<input type="checkbox"/>	<input type="checkbox"/>
Well	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Existing

If proposed water supply is by well, are the surrounding water well records attached?

Yes Appendix E No

b) What type of **sewage disposal** is proposed?

	Severed Parcel	Retained Parcel
Municipally owned/operated	<input type="checkbox"/>	<input type="checkbox"/>
Septic	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Existing
Other	<input type="checkbox"/>	<input type="checkbox"/>

c) Other Services (check if **any** of these services are **available** to the Subject Lands)

Electricity School Bus Telephone Garbage Collection Other Natural Gas

13. Agricultural Property History

a) What type of farming has been or is currently being conducted? Indicate this on the proceeding page by circling the Animal Type, Description, and Barn Type. Label each barn with a number on the sketch and the form. See MDS Report Appendix E

b) How long have you owned the farm? 32 Years

c) Area of total farm holding: Hectares 36 Acres 89

d) Number of tillable: Hectares 0 Acres 0

e) Is there a barn on the parcel to be severed? Yes No

Condition of Barn _____ Present Use _____

Capacity of barn in terms of livestock _____

f) Is there a barn on the parcel to be retained? Yes No

Condition of Barn Fair Present Use Equipment storage/Workshop

Capacity of barn in terms of livestock 30 to 35 beef cattle, See Appendix E

g) Are there any barns, on other properties, within 1 kilometre (1,000 metres) of the proposed lot?

Yes No

14. Property History

a) 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 Grey County or Georgian Bluffs file number:

1989 Severance Reference Plan 16R-3684

2007 Severance Reference Plan 16R-9173 Land added to 1989 Lot

County or Township file number not known

Office Use Only

a) Please indicate the existing Official Plan designation of the subject land:

Agricultural	_____	Wetlands	_____
Rural	_____	Urban	_____
Urban Fringe	_____	Hamlet	_____
Hazard Lands	_____	Recreation	_____
NEC Area	_____	Inland Lakes & Shoreline	_____
Special Agriculture	_____	Mineral Resource Extraction	_____
Space Extensive Commercial	_____	Space Extensive Industrial	_____

b) Please indicate the current Zoning on the Subject Property:

c) Please indicate whether any of the following environmental constraints apply to the subject land:

Primary Aggregate	_____	Special Policy	_____
Life ANSI	_____	Existing Land Fill Sites	_____
Earth ANSI	_____	Abandoned Land Fill Sites	_____
Earth Life ANSI	_____	Cold Water Streams	_____
Cool/Warm Water Lake	_____	Cool/Warm Water Stream	_____
Warm Water Streams	_____	Cold Water Lake	_____
Warm Water Lake	_____		

Is the application being submitted in conjunction with a proposed **Official Plan Amendment**?

Yes _____ No _____

If yes, and if known, specify the Ministry file number and status of the application.

d) Has the parcel intended to be severed ever been, or is it now, the subject of an **application for a Plan of Subdivision** under the Planning Act?

Yes _____ No _____ Unknown _____

If yes, and if known, provide for each parcel to be severed, the Ministry and/or Grey County file number: _____

e) Has an application for a **Development Control Permit** been submitted to/approved by the Niagara Escarpment Commission?

Yes _____ No _____ Submitted _____ Approved _____

16. Affidavit or Sworn Declaration

I/We John and Pat Johnston

(Applicant(s) Name(s))

Of the Township of Georgian Bluffs
(City/Township)

In the _____ County of Grey
(County)

Make oath and say (or solemnly declare) that the information contained in this application is true and that the information contained in the documents that accompany this application in respect of this application is true.

I (we) hereby authorize municipal planning staff and the municipality's agents to enter the property for the purposes of performing inspections and gathering information, without further notice, related to the processing of this application.

Sworn (or declared) before me at the

Township of Georgian Bluffs.

In the County of Grey.

This 30th day of June 2021

[Signature]
Signature – Commissioner of Oaths

Signature of Applicants Agent

Name in Print

**BRITTANY DRURY, a Commissioner, etc.,
County of Grey, Clerk of the
Corporation of the Township of Georgian Bluffs**

Applicant(s) Agent Name in Print

[Signature]
Signature of Applicant(s)

[Signature]
Signature of Applicant(s)

John Johnston
Applicant(s) name in Print

Pat Johnston
Applicant(s) name in Print