



## APPLICATION FOR SUBDIVISION

Corporation of The Town of Smiths Falls  
77 Beckwith Street N, ON K7A 2B8, P.O. Box 695  
Phone: 613.283.4124 Fax: 613.283.4764

### Information Sheet

#### 1. Completion of Application

All applicable information, including supporting studies, requested throughout any pre-consultation must be provided to conduct an initial review. The initial review of the application will determine if any other information is required.

***Note: Prior to submitting this application, applicants are strongly advised to pre-consult with the Town's Planning Department to discuss application and project requirements.***

#### 2. Statutory Declaration

The application requires a Statutory Declaration which must be declared in the presence of a Commissioner for taking affidavits. The Declaration can be found on page 8.

#### 3. Planning Rationale

The application must be accompanied by a written rationale which provides a complete explanation of the requested subdivision within context of the Town's Official Plan, Zoning By-law, Provincial Policy Statement (2020) and any designation under Provincial Plan(s).

#### 4. Required fee

The cost of a subdivision application is \$3000 plus \$10.00 per proposed lot, payable to the Town of Smiths Falls by cash, debit or certified cheque. The fee is required upon submission of the application.

#### External Agencies

External agencies will be circulated on the application as part of the technical review process. This may result in additional incurred costs beyond the application fee. These agencies will invoice owners/applicants directly for services rendered.

The Rideau Valley Conservation Authority (RVCA) requires an initial fee of \$4120, payable by certified cheque to the Rideau Valley Conservation Authority. The RVCA review fee, must be submitted with the application to the Town of Smiths Falls. Should the RVCA incur costs beyond the initial review fee which are associated with the application, the costs may be invoiced to the applicant.

#### 6. Submission

The applicant must forward two (2) physical copies and an electronic version of the application and all supporting documentation to the Planning Department.

**Corporation of The Town of Smiths Falls, 77 Beckwith Street N, ON K7A 2B8, P.O. Box 695**  
**Phone: 613.283.4124, Fax: 613.283.474**  
[www.smithsfalls.ca](http://www.smithsfalls.ca)

# APPLICATION FOR SUBDIVISION

(Sect 51, Planning Act RSO 1990)

Office  
Use

File #

Date Received:

Complete Date:

Fee Paid/Date:

The undersigned hereby applies to the Council of the Corporation of the Town of Smiths Falls for a subdivision application under section 51 of the *Planning Act* in respect of the lands hereinafter described, as outlined in this application and supporting documents. The undersigned hereby acknowledges that the filing of this application alone does not necessarily constitute fulfilling all the requirements of either the Town or the *Planning Act*.

## 1. Ownership Information

Registered Owner's Name(s):

Mailing Address:

Telephone - Main:

Alternate:

Email:

Date Property Acquired by the Current Owner (if known):

Copy of the deed must be submitted with the application.

## 2. Applicant Information

Applicant/Agent Name:

Note: If Applicant/Agent is different than Property Owner, the Owner's Authorization is required (see last page). Where indicated, the Applicant/Agent will receive all communications relating to this application.

Mailing Address:

Telephone - Main:

Alternate:

Email:

Please Contact

Owner

Agent

Both

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**3. Description of Subject Lands**

Geographic Twp: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Concession(s): \_\_\_\_\_

Reg. Plan: \_\_\_\_\_ Lot/Block: \_\_\_\_\_ Ref. Plan: \_\_\_\_\_ Part(s): \_\_\_\_\_

Street Address: \_\_\_\_\_ Roll Number: 0904- \_\_\_\_\_

Frontage: \_\_\_\_\_ (m) Depth: \_\_\_\_\_ (m) Area: \_\_\_\_\_ (m<sup>2</sup>)

**Type of Access:** (check appropriate box)

- Provincial Highway/Connecting Link (Lombard and Cornelia St)
- Municipal Road (maintained year around)
- Right-of-way (private road)
- Municipal Road (seasonally maintained)
- Water Access Only (Specify parking/docking facilities) \_\_\_\_\_
  
- Other (explain): \_\_\_\_\_

Is there any easements or covenants currently restricting this property:  Yes  No

If yes, please describe: \_\_\_\_\_

Are the lands within an area designated under provincial plan(s)?  Yes  No

If yes, please include an explanation in the Planning Rationale.  Rationale Attached

**4. Present Zoning or Development Permit Category(ies)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Present Official Plan Designation(s)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# APPLICATION FOR SUBDIVISION

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## 6. Proposed Land Use

Intended Use	No. of Units	No. of Lots and/or Blocks	Area of Land for Each Use (Hectares)	No. of Parking Spaces Provided	Density (units/hectares)
Detached Residential				N/A	
Semi-Detached Residential				N/A	
Multiple Attached Residential					
Apartment Residential					
Seasonal Residential					
Mobile Home					
Other Residential					
Commercial					
Industrial					
Institutional					
Park or Open Space	N/A			N/A	N/A
Roads	N/A			N/A	N/A
Other					

Number of units proposed per net hectares: \_\_\_\_\_

Number of parking spaces proposed for subdivision: \_\_\_\_\_

Number of roads proposed for subdivision: \_\_\_\_\_

If any of the proposed uses are identified as Industrial or Other please provide a discription of the use:

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## 7. Municipal Services/Storm Drainage

**Water Supply:**

- |   |                                    |
|---|------------------------------------|
| <input type="checkbox"/> Water Available          | <input type="checkbox"/> Connected |
| <input type="checkbox"/> Sanitary Sewer Available | <input type="checkbox"/> Connected |

If requested subdivision permits development on a privately owned and operated individual communal septic system, would more than 4,500 liters of effluent be produced per day as a result of the development being completed?

- Yes, servicing options and hydrogeological report attached
- No (less than 4,500 liters of effluent)
- N/A

Is the storm drainage provided by sewers, ditches, swales or other means?

## 8. Application History

**a)** Is the subject property subject to any of the following applications?

Application	Yes	No	Unknown	File # and Status
Official Plan Amendment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Zoning By-law Amendment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Plan of Subdivision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Site Plan Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Consent (Severance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Minor Variance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

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**b)** Has the subject land ever been the subject of an application for approval of a plan of subdivision under Sec. 51 of the *Planning Act*

- Yes                       No

If yes, please indicate the file number and status of the application:

File No. \_\_\_\_\_ Status \_\_\_\_\_

**c)** If a consent has been acquired for this property by the past, please indicate the date and name of the transfer, and the uses and the severed land.

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**9. Archaeological Assessment**

Please outline any areas of possible archaeological potential as defined by the Ontario Ministry of Heritage, Sport, Tourism and Culture Industries.

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**10. Supplementary Information (to be attached to this application)**

**Planning Rationale:** Rationale from the applicant or agent explaining the proposed subdivision/condominium and reasons for the application. Include how the proposed subdivision/condominium conforms with the Provincial Policy Statement (PPS) issued under subsection 3(1) of the *Planning Act*.

- Attached

**Additional Information:** Other supporting information that may be required to support this application, as outlined in the consultation.

- Draft Subdivision Plan Attached
- Copy of Transfer Document/Deed Attached
- Copy of Existing Survey or Plan, if applicable
- Proposed Public Consultation Strategy Attached
- Archaeological Assessment Conservation Plan Attached
- Other Studies or Plans Identified in the Pre-consultation Attached

***Please provide large plans folded instead of rolled.***

**APPLICATION FOR SUBDIVISION/CONDOMINIUM**  
(Sect 51, Planning Act RSO 1990)

**Statutory Declaration**

I/We, \_\_\_\_\_ of (the town/township) \_\_\_\_\_  
in the country/district/region of \_\_\_\_\_ solemnly declare that:

- i) All above statements and the information contained in this application and all of the additional information transmitted herewith are true, and I/we 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 the Canada Evidence Act;
- ii) The Corporation of the Town of Smiths Falls staff, committee members, councilors and their designates are authorized to enter the property for the purposes of assessing this application so long as the file remains open; and,
- iii) Should the Corporation of the Town of Smiths Falls incur professional or legal costs beyond the application fee which are associated with the application, I/we will be responsible for reimbursing such costs to the Town upon invoice.

**Declared before me at the town/township of**

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

\_\_\_\_\_  
**in the County/District/Region of**

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

\_\_\_\_\_  
**This \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_**

\_\_\_\_\_  
**Commissioner of Oaths**

\*To be witnessed by a Commissioner for taking affidavits. If joint ownership, signature of each individual is required. If the applicant is a corporation, the application shall be signed by an Officer of the corporation and the corporation's seal shall be affixed to such signature.

**Owner's Authorization for Agent to Make Application (Complete if Agent Appointed)**

I/We, \_\_\_\_\_ am/are the owner(s) of the land  
and that is subject of this application for a plan of subdivision; and,

I, We authorize \_\_\_\_\_  
to make this application on my/our behalf.

\_\_\_\_\_  
**Signature of Owner(s)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Owner(s)**

\_\_\_\_\_  
**Date**