



## COMMENT REQUEST FORM

**FILE NO.: AN-053/2009**

**ROLL NO.: 3310-543-070-36500**

- ☒ Building Department
- ☒ Building Inspector (Sewage System Review)
- ☒ Forestry Division
- ☒ Treasury Department
- ☒ Public Works ➤ NOTE: If an agreement is required please attach the clauses you require in the agreement.

- ☒ GIS Section
- ☐ Norfolk Power
- ☐ Ministry of Transportation
- ☐ Railway
- ☐ Conservation Authority

This Committee has received a consent/minor variance application concerning land within your jurisdiction. The proposal is explained on the attached application. If you require further information, please feel free to contact this office. In order to properly consider this application, the **Committee of Adjustment** requires your comments by:

# NOVEMBER 30<sup>th</sup>, 2009

**APPLICANT:**

Allan Franklin, 259 Harris St. Ingersoll ON N5C 1Y5

**LOCATION:**

Lot 607, Plan 436 SWAL (76 Old Cut Blvd.)

**PROPOSAL:**

CONSTRUCT SUNDROOM ADDITION REQUIRING RELIEF OF:

- 1.44 m. (4.72 ft.) from the required lot frontage of 15 m. (49.21 ft.) to recognize existing lot frontage of 13.56 m. (44.54 ft.);
- 0.32 m. (1.05 ft.) from the required interior sideyard (LEFT) setback of 1.2 m. (3.94 ft.) to permit interior side yard (LEFT) setback of 0.88 m. (2.9 ft.);
- 4.21 m. (13.81 ft.) from required rear yard setback of 9 m. (29.53 ft.) to permit rear yard of 4.79 m. (15.72 ft.);
- 5.24 m. (17.19 ft.) from required rear yard accessory building setback of 7.5 m. (24.60 ft.) to permit rear yard accessory setback of 2.26 m. (7.41 ft.)

### PLEASE REPLY BY EMAIL DIRECTLY TO:

**SCOTT PECK, SENIOR PLANNER, MCIP, RPP**

Norfolk County, 22 Albert Street, Langton, ON N0E 1G0  
(519) 875-4485 ext 1234

**EMAIL: [t.scott.peck@norfolkcounty.ca](mailto:t.scott.peck@norfolkcounty.ca)**

**COMMITTEE OF ADJUSTMENT DECISION:**

If you wish to be notified of the Decision of Norfolk County, Committee of Adjustment in respect of the proposed consent, you must make a written request to:


Karen Judd, ACST, Secretary-Treasurer  
P.O. Box 128, 22 Albert Street, Langton ON N0E 1G0  
Phone: (519) 875-4485 ext 1835; Fax: (519) 875-4789  
[karen.judd@norfolkcounty.ca](mailto:karen.judd@norfolkcounty.ca)

**APPEALS TO THE ONTARIO MUNICIPAL BOARD:**

If a person or public body that files an appeal of a Decision of Norfolk County Committee of Adjustment in respect of the proposed consent or variance does not make written submission to the Norfolk County Committee of Adjustment, before it gives or refuses to give a provisional consent or variance, the Ontario Municipal Board may dismiss the appeal.

**CIRCULATION DATE: November 16<sup>th</sup>, 2009**

**MINOR VARIANCE**

OSSDS form not  
required as per  
Scott Hemmell  
Oct-15/09.  


**Office Use:**

File Number: AN-053/2009  
Related File: \_\_\_\_\_  
Fees Submitted: Oct-15/09  
Application Submitted: Oct-15/09  
Sign Issued: Oct-15/09  
Complete Application: Oct-15/09

This development application must be typed or printed in ink and completed in full. An incomplete or improperly prepared application may not be accepted and could result in processing delays.

**Property assessment roll number: 3310- 543-070-36500**

The undersigned hereby applies to the Committee of Adjustment under Section 45 of the *Planning Act*, R.S.O. 1990, c. P. 13, for relief as described in this application from by-law no. 1-NO 85

**A. APPLICANT INFORMATION**

Name of Applicant<sup>1</sup> ALLAN FRANKLIN Phone # 519-485-1016  
Address 259 HARRIS ST. Fax # \_\_\_\_\_  
Town / Postal Code WINDERSOLL ONT. N5C 1V5 E-mail \_\_\_\_\_

<sup>1</sup> If the applicant is a numbered company provide the name of a principal of the company.

Name of Agent \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Fax # \_\_\_\_\_  
Town / Postal Code \_\_\_\_\_ E-mail \_\_\_\_\_

Name of Owner<sup>2</sup> LYNDA + ALLAN FRANKLIN Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Fax # \_\_\_\_\_  
Town / Postal Code \_\_\_\_\_ E-mail \_\_\_\_\_

<sup>2</sup> It is the responsibility of the owner or applicant to notify the Planner of any changes in ownership within 30 days of such a change.

Please specify to whom all communications should be sent<sup>3</sup>: ☐ Applicant ☐ Agent ☐ Owner

<sup>3</sup> Unless otherwise directed, all correspondence, notices, etc., in respect of this development application will be forwarded to the Applicant noted above, except where an Agent is employed, then such will be forwarded to the Applicant and Agent.

Names and addresses of any holders of any mortgagees, charges or other encumbrances on the subject lands:

TOT.

## MINOR VARIANCE

### B. LOCATION/LEGAL DESCRIPTION OF SUBJECT LANDS

Geographic Township	<u>South Walsingham</u>	Urban Area or Hamlet	<u>Long Point</u>
Concession Number	<u>436</u>	Lot Number(s)	<u>607</u>
Registered Plan Number		Lot(s) or Block Number(s)	
Reference Plan Number		Part Number(s)	
Frontage (metres/feet)	<u>44.54' (13.56m)</u>	Depth (metres/feet)	<u>123.3' (37.58m)</u>
Width (metres/feet)	<u>                    </u>	Lot area (m <sup>2</sup> / ft <sup>2</sup> or hectares/acres)	<u>728m<sup>2</sup> (7840.42')</u>
Municipal Civic Address	<u>76 Old Cut Blvd.</u>		

Are there any easements or restrictive covenants affecting the subject lands?

☐ Yes ☒ No

If yes, describe the easement or covenant and its effect:

\_\_\_\_\_

\_\_\_\_\_

### C. PURPOSE OF DEVELOPMENT APPLICATION

Please explain what you propose to do on the subject lands/premises which makes this development application necessary (if additional space is required, please attach a separate sheet):

Shedroom - took it over to garage.

- constructed in 2009.

\_\_\_\_\_

\_\_\_\_\_

Please explain the nature and extent of the amendment requested (assistance is available):

- Permit construction of shedroom addition requiring relief of:
- 1.44m<sup>(4.72')</sup> from required lot frontage of 15m (49.21') to permit lot frontage of 13.56m (44.54')
  - 0.32m (1.05') from required interior sideyard<sup>(LT)</sup> setback of 1.2m (3.94') to permit Int. sideyard (LT) of 0.88m (2.9')
  - 4.21m (13.81') from required rear yard setback of 9m (29.53') to permit rear yard of 4.79m (15.72')



- 5.24m (17.19') from required rear yard accessory setback of ~~7.5m~~ (24.60') to permit rear yard setback of 2.26m (7.41')

## MINOR VARIANCE

Please explain why it is not possible to comply with the provision of the zoning by-law:

under size lot.

## D. PROPERTY INFORMATION

Present official plan designation(s):

Resort

Present zoning:

Long Point

Please describe **all existing** buildings or structures on the subject lands and whether they are to be retained, demolished or removed. If retaining the buildings or structures, please describe the type of buildings or structures, and illustrate the setback, in metric units, from front, rear and side lot lines, ground floor area, gross floor area, lot coverage, number of storeys, width, length, height, etc. on your attached sketch which must be included with your application:

- 1 vacation home

- 1 boat house (on adjacent MNR land)

If known, the date existing buildings or structures were constructed on the subject lands:

none

If an addition to an existing building is being proposed, please explain what will it be used for (e.g. bedroom, kitchen, bathroom, etc.). If new fixtures are proposed, please describe.

- family room/living space.

## MINOR VARIANCE

Please describe **all proposed** buildings or structures/additions on the subject lands. Describe the type of buildings or structures/additions, and illustrate the setback, in metric units, from front, rear and side lot lines, ground floor area, gross floor area, lot coverage, number of storeys, width, length, height, etc. on your attached sketch which must be included with your application:

*Sumoan already constructed*

If known, the date the proposed buildings or structures will be constructed on the subject lands:

*2009*

Are any existing buildings on the subject lands designated under the *Ontario Heritage Act* as being architecturally and/or historically significant?

☐ Yes

☒ No

If yes, identify and provide details of the building:

The date the subject lands was acquired by the current owner:

*April 17 2008*

Present use of the subject lands:

*cottage*

If known, the length of time the existing uses have continued on the subject lands:

*1958*

Existing use of abutting properties:

*marsh & cottages*

## E. PREVIOUS USE OF THE PROPERTY

Has there been an industrial or commercial use on the subject lands or adjacent lands?

☐ Yes

☒ No

☐ Unknown

If yes, specify the uses:

Has the grading of the subject lands been changed through excavation or the addition of earth or other material?

☐ Yes

☒ No

☐ Unknown



## MINOR VARIANCE

Has a gas station been located on the subject lands or adjacent lands at any time?

☐ Yes ☒ No ☐ Unknown

Has there been petroleum or other fuel stored on the subject lands or adjacent lands at any time?

☐ Yes ☒ No ☐ Unknown

Is there reason to believe the subject lands may have been contaminated by former uses on the site or adjacent sites?

☐ Yes ☒ No ☐ Unknown

Provide the information you used to determine the answers to the above questions:

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If you answered yes to any of the above questions, a previous use inventory showing all known former uses of the subject lands, or if appropriate, the adjacent lands, is needed.

Is the previous use inventory attached?

☐ Yes ☐ No

## F. STATUS OF OTHER PLANNING DEVELOPMENT APPLICATIONS

Has the subject land or land within 120 metres of it been or is now the subject of an application under the *Planning Act, R.S.O. 1990, c. P. 13* for:

- (a) a minor variance or a consent;
- (b) an amendment to an official plan, a zoning by-law or a Minister's zoning order; or
- (c) approval of a plan of subdivision or a site plan?

☒ Yes ☐ No ☐ Unknown

If yes, indicate the following information about **each application**:

File number:

AN 49 2008

Land it affects:

\_\_\_\_\_

Purpose:

\_\_\_\_\_

Status/decision:

withdrawn

## MINOR VARIANCE

Effect on the requested amendment:

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If additional space is required, please attach a separate sheet.

Is the above information for other planning developments applications attached?

☐ Yes ☐ No

## G. PROVINCIAL POLICY

Is the requested amendment consistent with the provincial policy statements issued under subsection 3(1) of the *Planning Act, R.S.O. 1990, c. P. 13*?

☒ Yes ☐ No

If no, please explain:

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Are the subject lands within an area of land designated under any provincial plan or plans?

☐ Yes ☒ No

If yes, does the requested amendment conform to or does not conflict with the provincial plan or plans:

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Are any of the following uses or features on the subject lands or within 500 metres (1,640 feet) of the subject lands, unless otherwise specified? Please check the appropriate boxes, if any apply.

Use or Feature	On the Subject Lands		Within 500 Metres (1,640 feet) of Subject Lands (Indicate Distance)	
Livestock facility or stockyard (if yes, complete Form 3 – available upon request)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Wooded area	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Municipal landfill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Sewage treatment plant or waste stabilization plant	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Provincially significant wetland (class 1, 2 or 3) or other environmental feature	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No ____ distance
Floodplain	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No ____ distance
Rehabilitated mine site	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Non-operating mine site within one kilometre	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Active mine site within one kilometre	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Industrial or commercial use (specify the use(s))	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Active railway line	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Seasonal wetness of lands	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Erosion	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance
Abandoned gas wells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No ____ distance

## MINOR VARIANCE

### H. SERVICING AND ACCESS

Indicate what services are available or proposed:

#### Water Supply

- ☐ Municipal piped water
- ☐ Communal wells
- ☒ Individual wells
- ☐ Other (describe below)

#### Sewage Treatment

- ☐ Municipal sewers
- ☐ Communal system
- ☐ Septic tank and file bed
- ☒ Other (describe below)

#### Storm Drainage

- ☐ Storm sewers
- ☐ Open ditches
- ☐ Other (describe below)

If other, describe:

Holding Tank

Have you consulted with Public Works & Environmental Services concerning stormwater management?

- ☐ Yes ☒ No

Has the existing drainage on the subject lands been altered?

- ☐ Yes ☒ No

Does a legal and adequate outlet for storm drainage exist?

- ☐ Yes ☐ No ☒ Unknown

Existing or proposed access to subject lands:

- ☐ Unopened road
- ☒ Municipal road
- ☐ Provincial highway
- ☐ Other (describe below)

If other, describe:

Name of road/street:

76 Old Cut Blv.



## MINOR VARIANCE

### I. OTHER INFORMATION

Is there a time limit that affects the processing of this development application?

☒ Yes ☐ No

If yes, describe:

ASAP

Is there any other information that you think may be useful in the review of this development application? If so, explain below or attach on a separate page.



# Zoning Deficiency

Norfolk CityView Web

Roll Number 33-10-543-070-365-00-0000

IMPORTANT: THIS FORM IS NOT COMPLETE UNLESS IT IS ACCOMPANIED BY AN ATTACHED "LOT DIAGRAM PLAN" INDICATING ALL APPLICABLE SITE CONDITIONS.

## Property Information

Issue Date:

Owner	FRANKLIN ALLAN ROBERT FRANKLIN LYNDIA JEAN	Property Lot		Former Municipality	
		Block		Plan	
Civic Address	76 OLD CUT BLVD Unit 00000	Part		Reference Plan	
Legal Description	SWAL PLAN 436 LOT 607	Concession		Extension to a Non-conforming use?	
Zoning		Current Use of Property	Cottage	Township	
By-law	1-NO 85	Proposed Use of Property	Unknown		

## Zoning Deficiency

### DEVELOPMENT STANDARDS

### Required (Meters/Feet)

### Proposed

### Deficiency

a) Lot Area	0.00	0.00	0.00	0.00	0.00	0.00
b) Lot Frontage	15.00	49.21	13.56	44.49 44.54	1.44	4.72
c) Front Yard Setback	0.00	0.00	0.00	0.00	0.00	0.00
d) Exterior Side Yard	0.00	0.00	0.00	0.00	0.00	0.00
e) Interior Side Yard (Rt)	0.00	0.00	0.00	0.00	0.00	0.00
f) Interior Side Yard (Lt)	1.20	3.94	0.88	2.89 2.9	0.32	1.05
g) Rear Yard	9.00	29.53	4.79	15.72	4.21	13.81
h) Dwelling Unit Area	0.00	0.00	0.00	0.00	0.00	0.00
i) % Lot Coverage	15.00		22.00		-7.00	
j) Height of Building	0.00	0.00	0.00	0.00	0.00	
k) Accessory Building	7.50	24.60	2.26	7.41	5.24	17.19
Accessory Building Comments	-rear yard setback for deck					
l) Parking	0.00	0.00	0.00	0.00	0.00	0.00
m) Other						
Other Clause:			Other Description:			

The "PROPOSED" information and any supporting documents have been provided by the owner/applicant. The above information is only in respect to "Zoning" (Minor Variance, Zone Change, etc.) and does not relieve the applicant/owner from obtaining all other permits and/or approvals, such as Health Approval, entrance Permits, Building Permit, etc.

I, the Owner/Applicant take full responsibility for the accuracy of the "PROPOSED" information provided on this form.

Signatures:

*Lyndia Franklin*  
Owner/Applicant

*SCOTT HAMILL*  
Building Inspector

OCT 14/09

### Instructions:

1. Owner/Applicant to complete unshaded areas.
2. Building Inspector to complete shaded areas.
3. The Owner/Applicant to submit completed form to the Area regional Planner or the secretary to Committee of Adjustment. Your contact in this regard is:

*LYNDIA FRANKLIN*  
Name

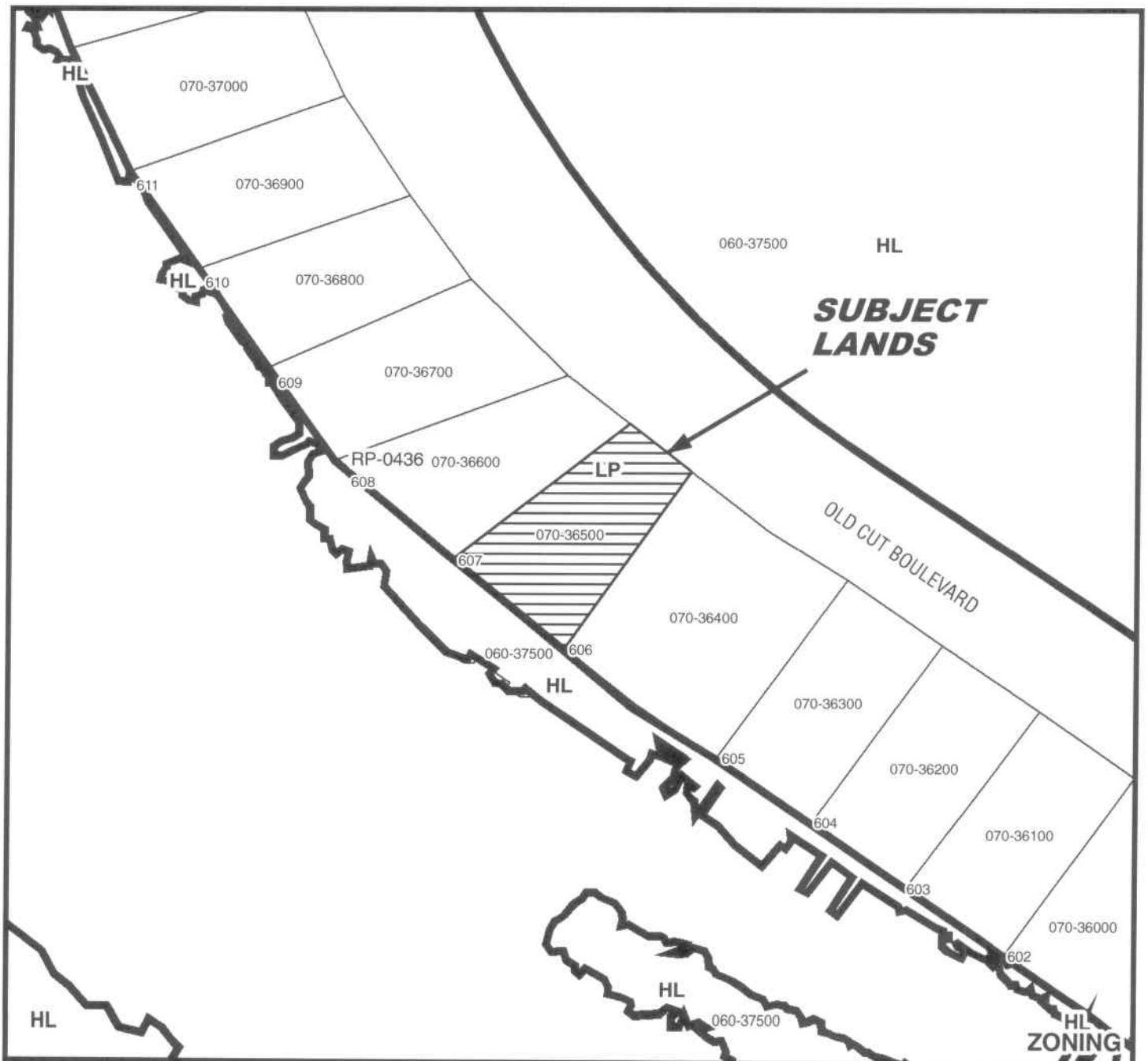
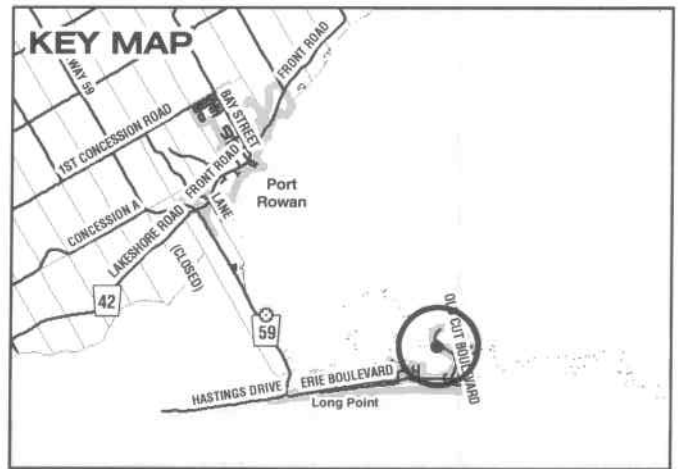
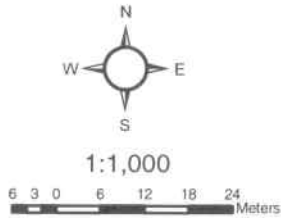
*359 HARRIS ST. INGERSOLL*  
Address

# MAP 1

File Number: AN-053/2009

Geographic Township of

**SOUTH WALSINGHAM**



## MAP 2

File Number: AN-053/2009

Geographic Township of SOUTH WALSINGHAM



5 2.5 0 5 10 15 20 Meters

1:1,000



# MAP 3

File Number: AN-053/2009

Geographic Township of SOUTH WALSINGHAM

