

**For Office Use Only:**

File Number	<u>ANPL2017183</u>	Application Fee	<u>1172<sup>00</sup></u>
Related File Number		Conservation Authority Fee	<u>TBD</u>
Pre-consultation Meeting	<u>JULY 2017</u>	OSSD Form Provided	<u>yes.</u>
Application Submitted	<u>AUG 10 17</u>	Planner	<u>MAT</u>
Complete Application	<u>AUG 28 17</u>	Public Notice Sign	

**Check the type of planning application(s) you are submitting.**

- ☐ Consent/Severance
- ☐ Surplus Farm Dwelling Severance and Zoning By-law Amendment
- ☒ Minor Variance

**Property Assessment Roll Number:** 543 070 16100

**A. Applicant Information**

**Name of Owner** DAVID DIVELL

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.

**Address** 3 HOWEY AVE

**Town and Postal Code** PORT ROWAN ON NOE 1M0

**Phone Number** 519 513-0160

**Cell Number** SAME

**Email** ddivell@yahoo.ca

**Name of Agent** \_\_\_\_\_

**Address** \_\_\_\_\_

**Town and Postal Code** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Cell Number** \_\_\_\_\_

**Email** \_\_\_\_\_

Please specify to whom all communications should be sent. Unless otherwise directed, all correspondence, notices, etc., in respect of this application will be forwarded to the agent noted above

- ☒ Owner ☐ Agent



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

**B. Location, Legal Description and Property Information**

1. Legal Description (include Geographic Township, Concession Number, Lot Number, Block Number and Urban Area or Hamlet):

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

Municipal Civic Address: \_\_\_\_\_

Present Official Plan Designation(s): \_\_\_\_\_

Present Zoning: RI \_\_\_\_\_

2. Is there a special provision or site specific zone on the subject lands?

☐ Yes ☐ No If yes, please specify:

\_\_\_\_\_

3. The date the subject lands was acquired by the current owner: APRIL 2016

4. Present use of the subject lands:

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

5. 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:

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

6. If known, the date existing buildings or structures were constructed on the subject lands: \_\_\_\_\_

7. 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.

Car Port  
\_\_\_\_\_  
\_\_\_\_\_

8. 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:

Set Backs are within Guidelines

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

ASAP

10. 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:

\_\_\_\_\_

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

60 Plus years

12. Existing use of abutting properties:

\_\_\_\_\_

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

☐ Yes ☒ No If yes, describe the easement or restrictive covenant and its effect:

\_\_\_\_\_

### C. Purpose of Development Application

Note: Please complete all that apply.

#### 1. Site Information

#### Existing

#### Proposed

Please indicate unit of measurement, i.e. m, m<sup>2</sup> or %, etc.

Lot frontage

66

\_\_\_\_\_

Lot depth

159

\_\_\_\_\_

Lot width

\_\_\_\_\_

\_\_\_\_\_

Lot area

\_\_\_\_\_

\_\_\_\_\_

Lot coverage

\_\_\_\_\_

620 Sq. FT



NORFOLK COUNTY  
COMMUNITY  
PLANNING  
DEVELOPMENT AND CULTURAL SERVICES

Revised May 2017  
Development Application  
Page 5 of 15



Front yard	_____	_____
Rear yard	_____	_____
Left Interior side yard	_____	_____
Right Interior side yard	_____	_____
Exterior side yard (corner lot)	_____	_____

2. Please outline the relief requested (assistance is available):

*I seek relief of 4.25% from the max. lot area*

3. Please explain why it is not possible to comply with the provision(s) of the Zoning By-law:

*This car port is to stop sticky yellow sap from landing on my new cars + truck*

4. Description of land intended to be severed in metric units:

Frontage: \_\_\_\_\_

Depth: \_\_\_\_\_

Width: \_\_\_\_\_

Lot Area: \_\_\_\_\_

Present Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Proposed final lot size (if boundary adjustment): \_\_\_\_\_

Description of land intended to be retained in metric units:

Frontage: \_\_\_\_\_

Depth: \_\_\_\_\_

Width: \_\_\_\_\_

Lot Area: \_\_\_\_\_

Present Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

5. Description of proposed right-of-way/easement in metric units:

Frontage: \_\_\_\_\_  
Depth: \_\_\_\_\_  
Width: \_\_\_\_\_  
Area: \_\_\_\_\_  
Proposed use: \_\_\_\_\_

6. Name of person(s), if known, to whom lands or interest in lands to be transferred, leased or charged (if known):  
\_\_\_\_\_

7. List all properties in Norfolk County, which are owned and farmed by the applicant and involved in the farm operation:

Owners Name: \_\_\_\_\_  
Roll Number: \_\_\_\_\_  
Total Acreage: \_\_\_\_\_  
Workable Acreage: \_\_\_\_\_  
Existing Farm Type: (i.e., corn, orchard etc) \_\_\_\_\_  
Dwelling Present?: ☐ Yes ☐ No If yes, year dwelling built \_\_\_\_\_

Owners Name: \_\_\_\_\_  
Roll Number: \_\_\_\_\_  
Total Acreage: \_\_\_\_\_  
Workable Acreage: \_\_\_\_\_  
Existing Farm Type: (i.e., corn, orchard etc) \_\_\_\_\_  
Dwelling Present?: ☐ Yes ☐ No If yes, year dwelling built \_\_\_\_\_

Owners Name: \_\_\_\_\_  
Roll Number: \_\_\_\_\_  
Total Acreage: \_\_\_\_\_  
Workable Acreage: \_\_\_\_\_  
Existing Farm Type: (i.e., corn, orchard etc) \_\_\_\_\_  
Dwelling Present?: ☐ Yes ☐ No If yes, year dwelling built \_\_\_\_\_



Owners Name: \_\_\_\_\_  
Roll Number: \_\_\_\_\_  
Total Acreage: \_\_\_\_\_  
Workable Acreage: \_\_\_\_\_  
Existing Farm Type: (i.e., corn, orchard etc) \_\_\_\_\_  
Dwelling Present?: ☐ Yes ☐ No If yes, year dwelling built \_\_\_\_\_

**Note: If additional space is needed please attach a separate sheet.**

#### **D. Previous Use of the Property**

1. Has there been an industrial or commercial use on the subject lands or adjacent lands? ☐ Yes ☒ No ☐ Unknown  
If yes, specify the uses (example: gas station, petroleum storage, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Has the grading of the subject lands been changed through excavation or the addition of earth or other material? ☐ Yes ☐ No ☐ Unknown
3. Is there reason to believe the subject lands may have been contaminated by former uses on the site or adjacent sites? ☐ Yes ☐ No ☒ Unknown
4. Provide the information you used to determine the answers to the above questions:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If you answered yes to any of the above questions in Section D, 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

#### **E. Provincial Policy**

1. 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:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. It is owner's responsibility to be aware of and comply with all relevant federal or provincial legislation, municipal by-laws or other agency approvals, including the Endangered Species Act, 2007. Have the subject lands been screened to ensure that development or site alteration will not have any impact on the habitat for endangered or threatened species further to the provincial policy statement subsection 2.1.7? ☒ Yes ☐ No

If no, please explain:

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3. Have the subject lands been screened to ensure that development or site alteration will not have any impact on source water protection? ☒ Yes ☐ No

If no, please explain:

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Note: If in an area of source water WHPA A, B or C please attach relevant information and approved mitigation measures from the Risk Manager Official.

4. Are any of the following uses or features on the subject lands or within 500 metres of the subject lands, unless otherwise specified? Please check boxes, if applicable.

**Livestock facility or stockyard** (submit MDS Calculation with application)

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Wooded area**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Municipal Landfill**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Sewage treatment plant or waste stabilization plant**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Provincially significant wetland (class 1, 2 or 3) or other environmental feature**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Floodplain**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Rehabilitated mine site**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Non-operating mine site within one kilometre**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Active mine site within one kilometre**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Industrial or commercial use (specify the use(s))**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Active railway line**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Seasonal wetness of lands**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Erosion**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Abandoned gas wells**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**F. Servicing and Access**

1. Indicate what services are available or proposed:

Water Supply

- |  |   |
|--|---|
| <input type="checkbox"/> Municipal piped water | <input type="checkbox"/> Communal wells         |
| <input type="checkbox"/> Individual wells      | <input type="checkbox"/> Other (describe below) |

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Sewage Treatment

- |   |   |
|---|---|
| <input type="checkbox"/> Municipal sewers         | <input type="checkbox"/> Communal system        |
| <input type="checkbox"/> Septic tank and tile bed | <input type="checkbox"/> Other (describe below) |
-



Storm Drainage

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

- 
2. Have you consulted with Public Works & Environmental Services concerning storm water management?
- ☐ Yes ☐ No
3. Has the existing drainage on the subject lands been altered?
- ☐ Yes ☐ No
4. Does a legal and adequate outlet for storm drainage exist?
- ☐ Yes ☐ No
5. Existing or proposed access to subject lands:
- ☐ Municipal road

☐ Provincial highway

☐ Unopened road

☐ Other (describe below)

Name of road/street:

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G. Other Information

1. Does the application involve a local business? ☐ Yes ☐ No
- If yes, how many people are employed on the subject lands?

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

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## **H. Supporting Material to be submitted by Applicant**

In order for your application to be considered complete, folded hard copies (number of paper copies as directed by the planner) and an **electronic version (PDF) of the site plan drawings, additional plans, studies and reports** will be required, including but not limited to the following details:

1. Concept/Layout Plan
2. All measurements in metric
3. Existing and proposed easements and right of ways
4. Parking space totals – required and proposed
5. All dimensions of the subject lands
6. Dimensions and setbacks of all buildings and structures
7. Names of adjacent streets
8. Natural features, watercourses and trees

In addition, the following additional plans, studies and reports, including but not limited to, **may** also be required as part of the complete application submission:

- ☐ Zoning Deficiency Form
- ☐ On-Site Sewage Disposal System Evaluation Form
- ☐ Environmental Impact Study
- ☐ Geotechnical Study / Hydrogeological Review
- ☐ Minimum Distance Separation Schedule
- ☐ Record of Site Condition

Your development approval might also be dependent on Ministry of Environment and Climate Change, Ministry of Transportation or other relevant federal or provincial legislation, municipal by-laws or other agency approvals.

**All final plans must include the owner's signature as well as the engineer's signature and seal.**

**I. Transfers, Easements and Postponement of Interest**

The owner acknowledges and agrees that if required it is their solicitor's responsibility on behalf of the owner for the registration of all transfer(s) of land to the County, and/or transfer(s) of easement in favour of the County and/or utilities. Also, the owner further acknowledges and agrees that it is their solicitor's responsibility on behalf of the owner for the registration of postponements of any charges in favour of the County.

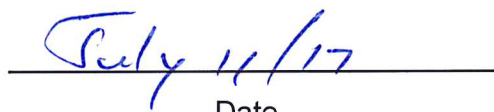
  
Owner/Applicant Signature

  
Date

**J. Permission to Enter Subject Lands**

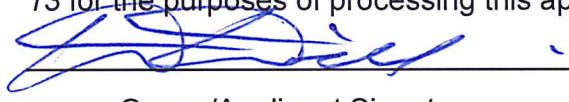
Permission is hereby granted to Norfolk County officers, employees or agents, to enter the premises subject to this application for the purposes of making inspections associated with this application, during normal and reasonable working hours.

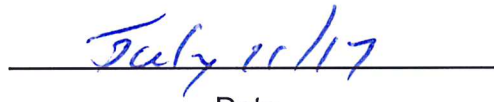
  
Owner/Applicant Signature

  
Date

**K. Freedom of Information**

For the purposes of the *Municipal Freedom of Information and Protection of Privacy Act*, I authorize and consent to the use by or the disclosure to any person or public body any information that is collected under the authority of the *Planning Act*, R.S.O. 1990, c. P. 13 for the purposes of processing this application.

  
Owner/Applicant Signature

  
Date

**L. Owner's Authorization**

If the applicant/agent is not the registered owner of the lands that is the subject of this application, the owner must complete the authorization set out below.

I/We \_\_\_\_\_ am/are the registered owner(s) of the lands that is the subject of this application for site plan approval.

I/We authorize \_\_\_\_\_ to make this application on my/our behalf and to provide any of my/our personal information necessary for the processing of this application. Moreover, this shall be your good and sufficient authorization for so doing.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

**M. Declaration of Applicant and Agent**

I hereby apply for development approval and declare that all of the above statements and the statements contained in all of the exhibits transmitted herewith are accurate and true. I understand that site plan approval is required before a building permit can be issued.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Date

**N. Declaration**

I, Dave Divell of 3 Horvey Ave  
solemnly declare that:

all of the above statements and the statements contained in all of the exhibits  
transmitted herewith are true and I 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*.

Declared before me at:

Langton

In Norfolk County

This 28 day of August

A.D., 2017

[Signature]

A Commissioner, etc.

[Signature]

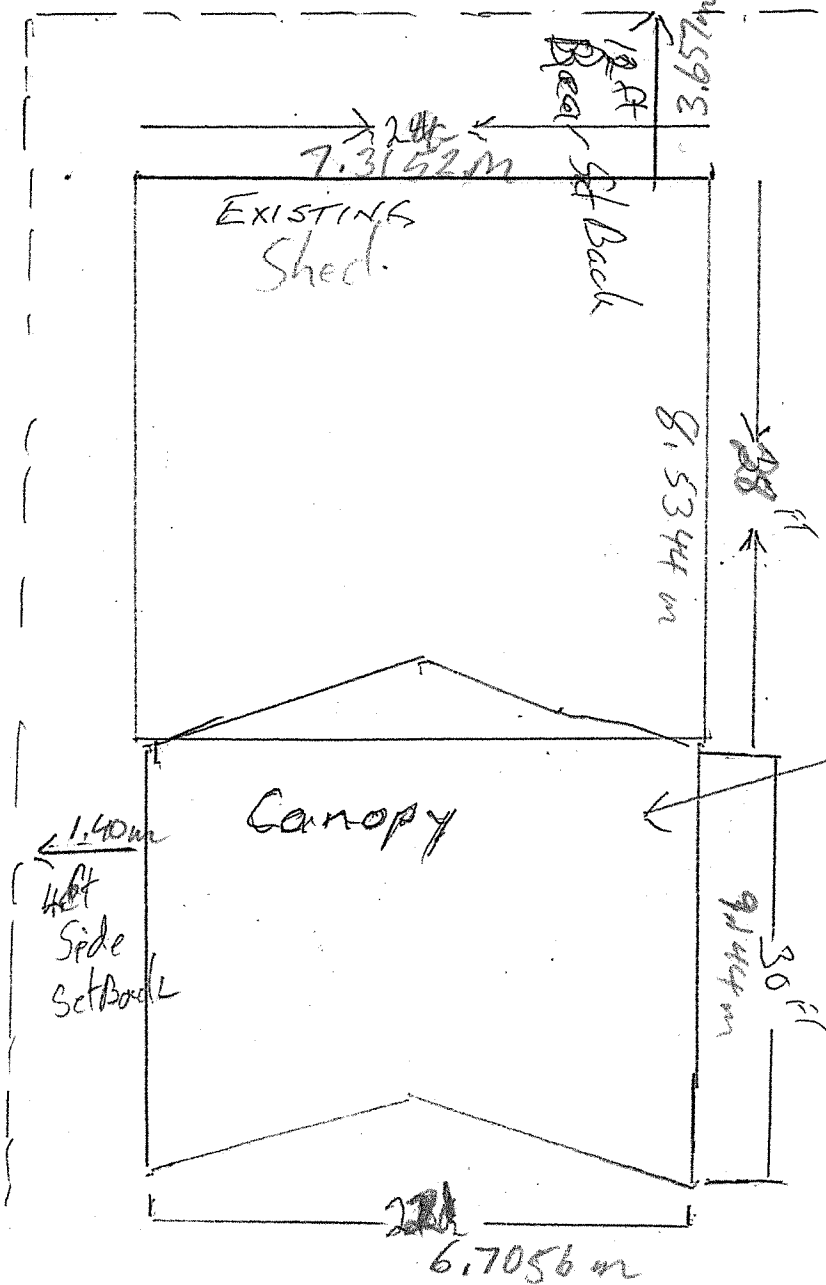
Owner/Applicant Signature

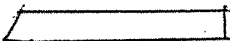

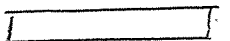
MATHEW VINCENT VAUGHAN, a  
Commissioner, etc., Province of Ontario,  
for the Corporation of Norfolk County.  
Expires September 21, 2018.

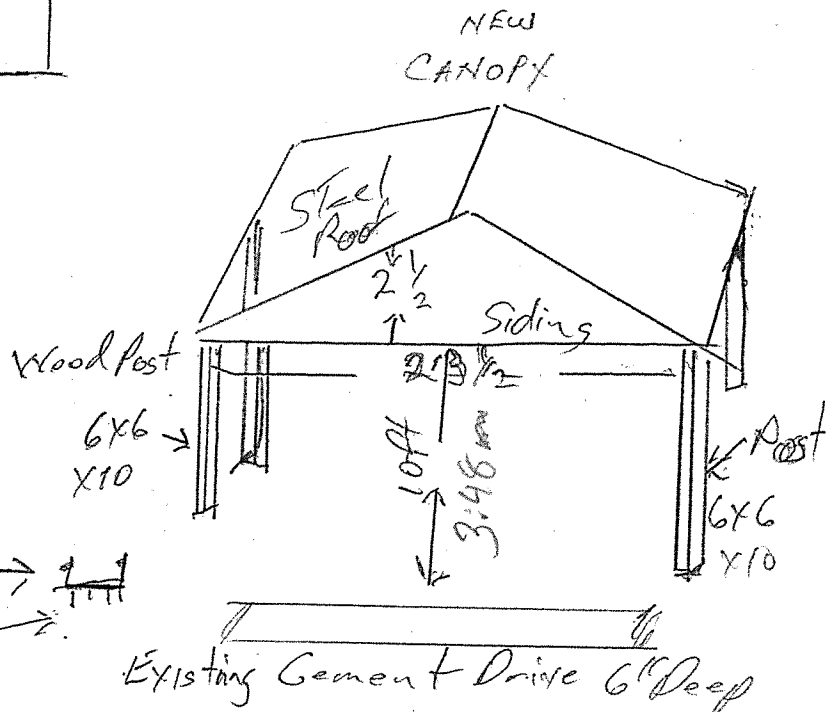
1. The first part of the paper is devoted to the study of the properties of the function  $f(x)$  defined by the equation



David Divell  
 3 Hoxey Ave  
 Port Rorven  
 NOE1MO 519 5730160  
 Canopy Plan June 20/17

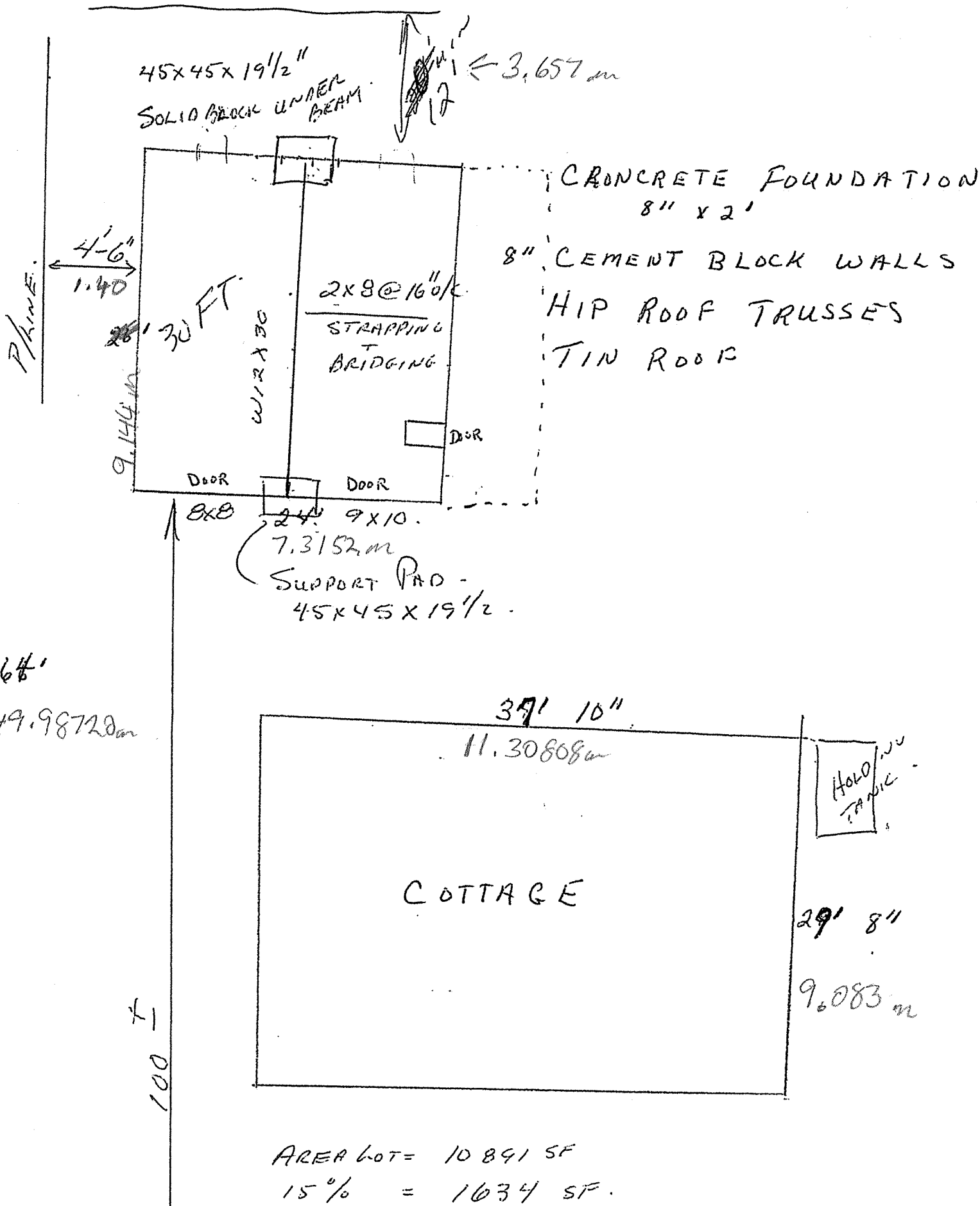


-  Centre Beam  
2x10x(2) x30
-  Rafter 2x4  
on a 24" centre
-  2x6 Lower Beams  
(2) 6x6  
Steel Plate 7' 11" x 11" x 1/2"  
4 Bolts



66.

20,11680m



clayton



Zoning Deficiency

Simcoe: 185 Robinson St.  
Simcoe, ON  
N3Y 5L6  
519-426-5870  
Langton: 22 Albert St.  
Langton, On.  
N0E 1G0  
519-875-4485

PROPERTY INFORMATION

Address:3 Howey Ave, Long Point                      Legal Decription:    SWAL PLAN 436 LOT 423 REG 0.25AC 66.00FR  
164.66D  
Roll Number:331054307016100                      Application #:  
Information Origins:Development Services GIS/Site Plan provided by owner

Resort Residential Zone (RR)

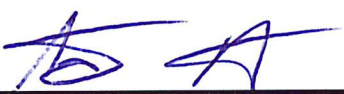
Accessory Structure					
3.2.1	a) building height	5.00	2.29	N/A	m
	b) minimum front yard	6.00		N/A	m
	c) minimum exterior side yard	6.00		N/A	m
	d) minimum interior side yard	1.20	1.98	N/A	m
	e) minimum rear yard	1.20	3.66	N/A	m
	f) through lot distance to street line	6.00		N/A	m
	g) Lot coverage (Note:Proposed Area)		143.53		m.sq
	i) lot coverage	10.00	14.25	4.25	%
	ii) usable floor area	100.00	57.22	N/A	m.sq

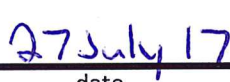
Comments                      1)Proposed addition to existing accessory building exceeds maximum lot coverage - deficient 4.25%

The proposed information and any supporting documents have been provided by the owner/applicant. The above information is only in respect to the associated planning application and does not relieve the owner/applicant from obtaining all other permits/approvals required. The owner/applicant hereby accepts full responsibility for the accuracy of the proposed information provided on this form.

Prepared By:  
Scott Puillandre

I have read and understand the above.

Signature of owner or authorized agent  
  
Signature of Zoning Administrator

date  
  
date

AS PER: Fritz R. Enzlin. CBCO,  
CRBO - Chief Building Official  
Manager, Building & Bylaw  
Division, Norfolk County

## Instructions for completing the Evaluation Form for Existing On-Site Sewage Systems

### General Information Applicable to Sewage Evaluations:

1. Please complete the following form by checking appropriate lines and filling out blanks.
2. This Evaluation Form must be completed by a "Qualified" person engaged in the business of constructing on site, installing, repairing, servicing, cleaning or emptying sewage systems.
3. If sewage system malfunctions are found during an evaluation (surfacing or discharge of improperly treated sewage effluent) which indicate a possible health hazard or nuisance, orders may be issued for correction.
4. Evaluations should be scheduled accordingly so as not to delay the application process.
5. Completed Forms MUST be submitted **no later than 30 days** prior to the scheduled public meeting. Failure to meet this date may cause the application to be deferred.
6. Completed Forms must be returned to:

### Building Division

Simcoe Office  
8 Schellburg Ave.  
Simcoe, ON N3Y 2J4  
Fax: (519) 426-1186

Langton Office  
22 Albert St.  
Langton, ON N3Y 2J4  
Fax: (519) 875-4789

7. Evaluation Forms will become part of the property records of Norfolk County Building Division.
8. No On-Site Sewage System Evaluation will be conducted where:
  - snow depth exceeds two (2) inches
  - where grass and brush exceeds twelve (12) inches, or
  - where a building served by the existing system has not been occupied for ninety (90) days.
9. The comments that are given as a result of this evaluation are rendered without complete knowledge or observation of some of the individual components of the sewage system and applies only to the date and time the evaluation is conducted.



Working together with our community  
to provide quality services.

## Evaluation Form for Existing On-Site Sewage Systems

OFFICE USE ONLY	FILE NO.:	DATE RECEIVED:
PROPERTY INFORMATION	Municipal Address: <u>3 Horvey Ave Port Rowan NOE1M0</u>	
Owner: <u>Dave Divell</u>	Lot:	Concession:
Lot Area:	Lot Frontage: <u>66 ft</u>	Assessment Roll No.
PURPOSE OF EVALUATION	<input checked="" type="checkbox"/> Consent <input type="checkbox"/> Minor Variance <input type="checkbox"/> Site Plan <input type="checkbox"/> Zoning <input type="checkbox"/> Other _____	
BUILDING INFORMATION	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural	
Building Area: <u>620 sq FT</u>	No. of Bedrooms:	No. of Fixture Units:
EVALUATOR'S INFORMATION	Evaluator's Name: <u>Richard Divell</u>	Company Name: <u>MILLER CONSTRUCTION</u>
Address: <u>PO Box 80 Port Rowan</u>	Postal Code: <u>NOE 1M0</u>	Phone: <u>519 403 8590</u>
Email: <u>millercnstrct@gmail.com</u>	BCIN #	<u>46 141</u>
SITE EVALUATION	Ground Cover (trees, bushes, grass, impermeable surface): <u>Grass</u>	Soil Type: <u>SNUP</u>
Site Slope: <input type="checkbox"/> Flat <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Steep	Soil Conditions: <input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry	Depth of Water Table: <u>5</u> ft.
Surface Discharge Observed: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Odour Detected: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Current Weather (at time of evaluation): <u>cloudy 23°C</u>
SYSTEM EVALUATION	Class of System: <input type="checkbox"/> 1 (Privy) <input type="checkbox"/> 2 (Greywater) <input type="checkbox"/> 3 (Cesspool) <input checked="" type="checkbox"/> 4 (Leaching Bed) <input type="checkbox"/> 5 (Holding Tank)	
Tank: <input checked="" type="checkbox"/> Pre-cast <input type="checkbox"/> Plastic <input type="checkbox"/> Fibre Glass <input type="checkbox"/> Wood <input type="checkbox"/> Other _____	Size: <u>800</u> Gal.	Pump: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Distribution System: Area: <input checked="" type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium	No. of Tile Runs: <u>4</u>	Total Length of Tile: <u>240</u>
Tile Material: <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Clay <input type="checkbox"/> Other	Ends: <input checked="" type="checkbox"/> Capped <input type="checkbox"/> Joined	Distance Between Tile Runs: <u>6'-0"</u>
Cover: <input type="checkbox"/> Filter Cloth <input type="checkbox"/> Sand <input checked="" type="checkbox"/> Top Soil <input type="checkbox"/> Seeded		
Setbacks:	Tank	Distribution Pipe
Distance to Buildings & Structures (ft)	<u>5'-0</u>	<u>11'-0</u>
Distance to Bodies of Water (ft)	<u>100</u>	<u>100</u>
Distance to Nearest Well (ft)	<u>50 +</u>	<u>50 +</u>
Distance to Property Lines	Front <u>65</u> Rear <u>10</u> Side <u>20</u> Side <u>46</u>	Front <u>70</u> Rear <u>17</u> Side <u>37</u> Side <u>10</u>



<div>OVERALL SYSTEM RATING</div> <div>Good.</div>	<div><input checked="" type="checkbox"/> System Working Properly / No Work Required</div> <div><input type="checkbox"/> System Functioning / Maintenance Required</div> <div><input type="checkbox"/> System Not Functioning / Minor Repair Required</div> <div><input type="checkbox"/> System Failure/Major Repair / Replacement Required</div> <div>Note: Any repair/replacement of an on site sewage system requires a building permit. Contact the Norfolk County Building Division at (519) 426-4377 for more information.</div> <div>Additional Comments: SYSTEM IN WORKING ORDER AND. THERE IS ROOM FOR NEW SYSTEM IF OR WHEN REQUIRED.</div>
<div>VERIFICATION</div> <div>OWNER: The owner is responsible for having a site evaluation conducted of the above mentioned property. Neither the evaluation nor the approval thereof shall in any way exempt the owner(s) from complying with the Ontario Building Code or any other applicable law.</div> <div>I, _____ (the owner of the subject property) hereby authorize the above mentioned evaluator to act on my behalf with respect to all matters pertaining to the existing on-site sewage system evaluation.</div> <div>Owner Signature _____ Date _____</div>	
<div>EVALUATOR:</div> <div>1. I, <u>Richard Niles</u> declare that this site evaluation is accurate as of the date of inspection. No determination of future performance can be made due to unknown conditions, future water usage over the life of the system, abuse of the system and/or inadequate maintenance, all of which may adversely affect the life of the system. This evaluation does not grant or imply any guarantee or warranty of the future performance of the sewage system.</div> <div><u>[Signature]</u> _____ Date <u>Aug 22/17</u> _____</div> <div>Evaluator Signature _____ Date _____</div>	
<div>BUILDING DIVISION COMMENTS</div> <div>Comments: _____</div> <div>_____</div> <div>I, _____ have reviewed the information contained in this form as submitted.</div> <div>Chief Building Official or designate _____ Date _____</div>	





**On Site Sewage Disposal System Location Plan**

DATE: Aug 22/17

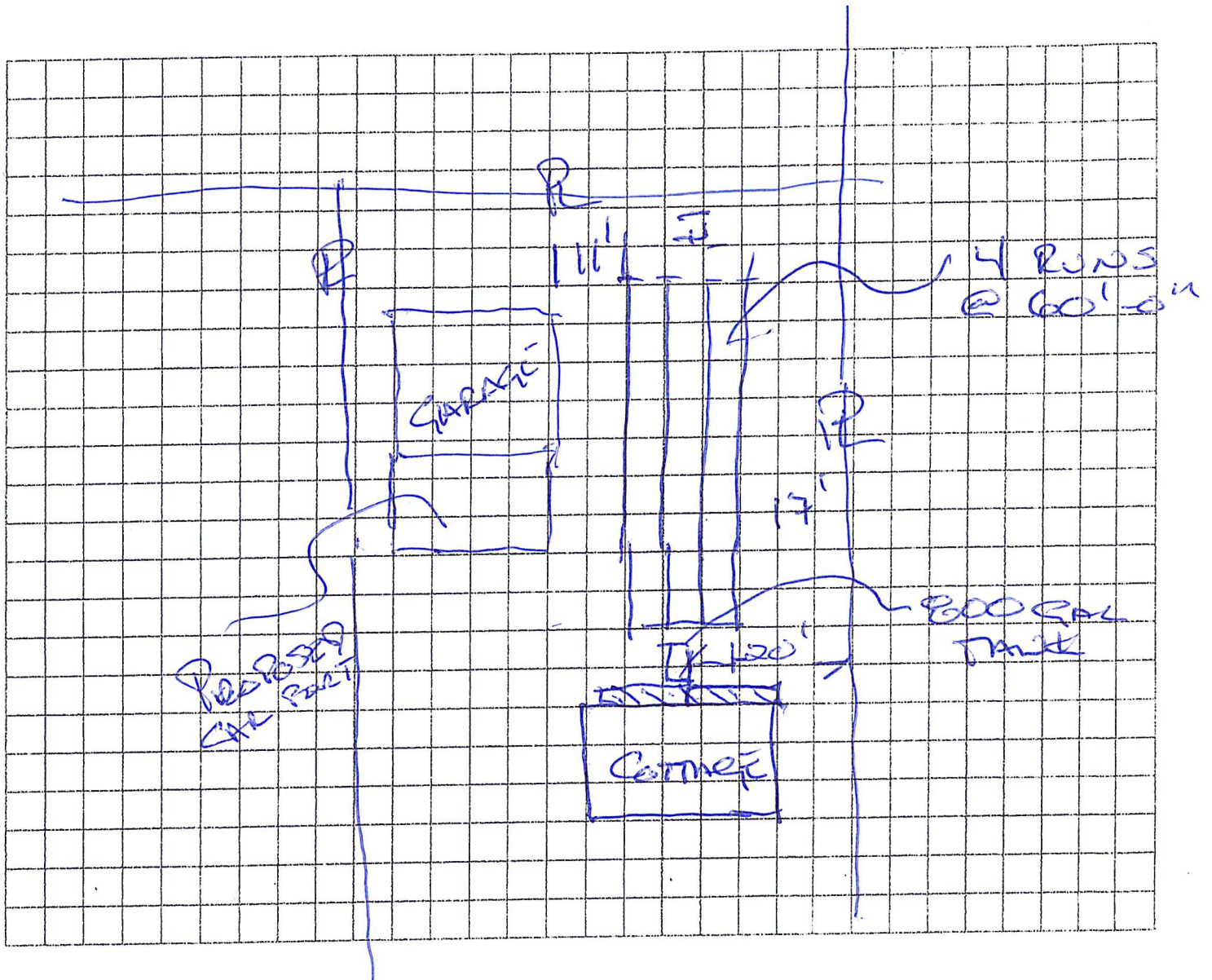
APPLICATION NUMBER: \_\_\_\_\_

OWNER: \_\_\_\_\_

EVALUATOR: R. Munnick

PROPERTY ADDRESS: 3 Howey Ave

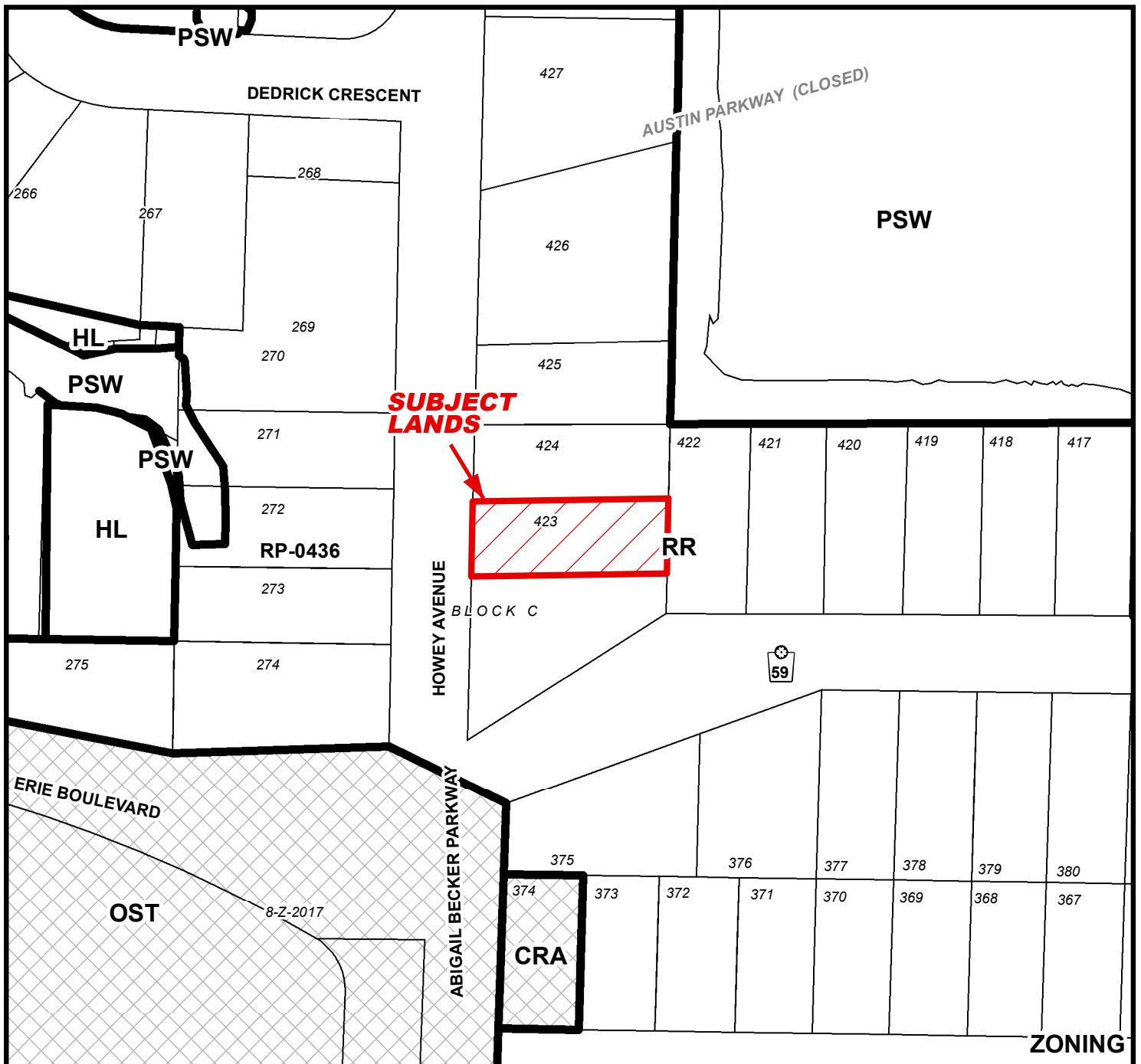
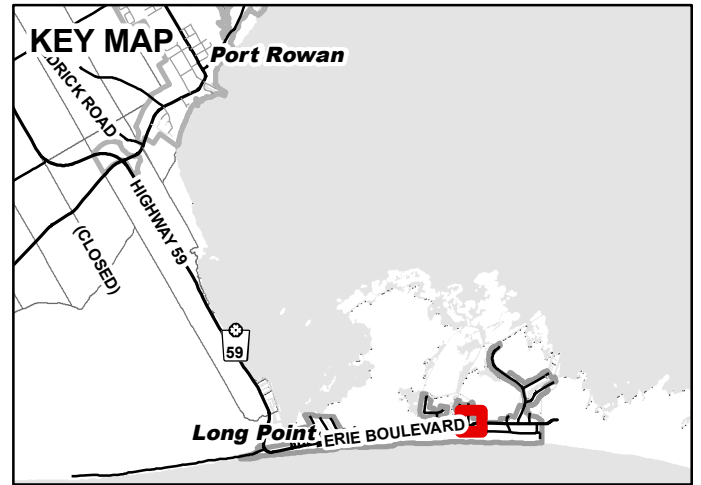
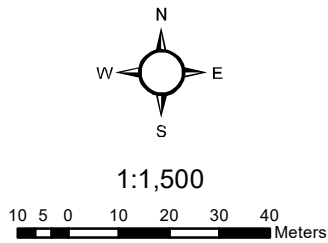
Please provide a DIMENSIONED sketch drawing indicating EXISTING AND PROPOSED property lines, existing roads and driveways, location of all existing buildings, location of existing wells, and location of existing septic tanks and tile beds.



PREPARED BY: \_\_\_\_\_

NOTE: The above sketch is not to exact scale.

**MAP 1**  
**File Number: ANPL2017183**  
Geographic Township of  
**SOUTH WALSHINGHAM**



**ZONING**



# MAP 2

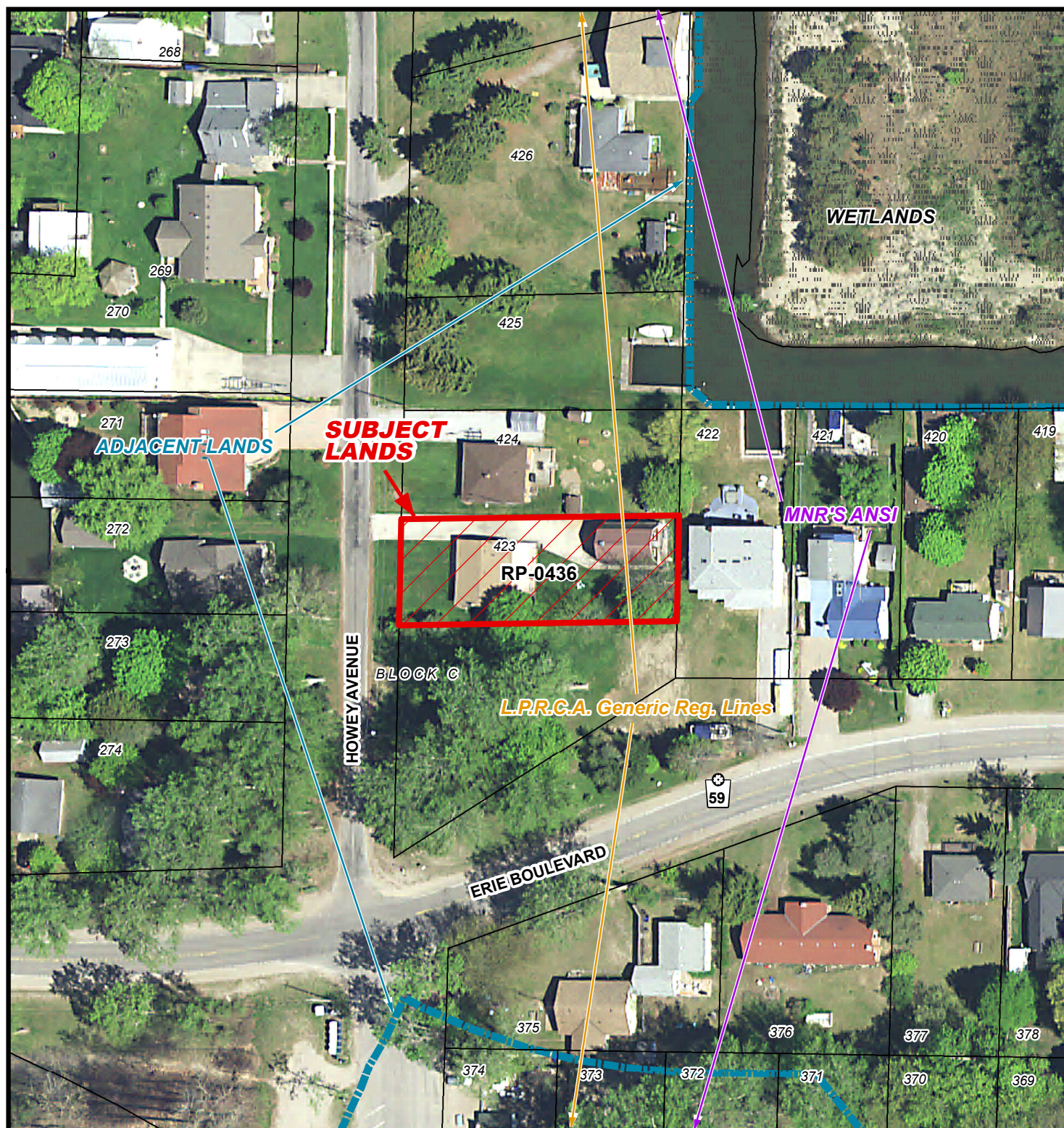
File Number: ANPL2017183

Geographic Township of SOUTH WALSHINGHAM



4 2 0 4 8 12 16 Meters

1:1,000

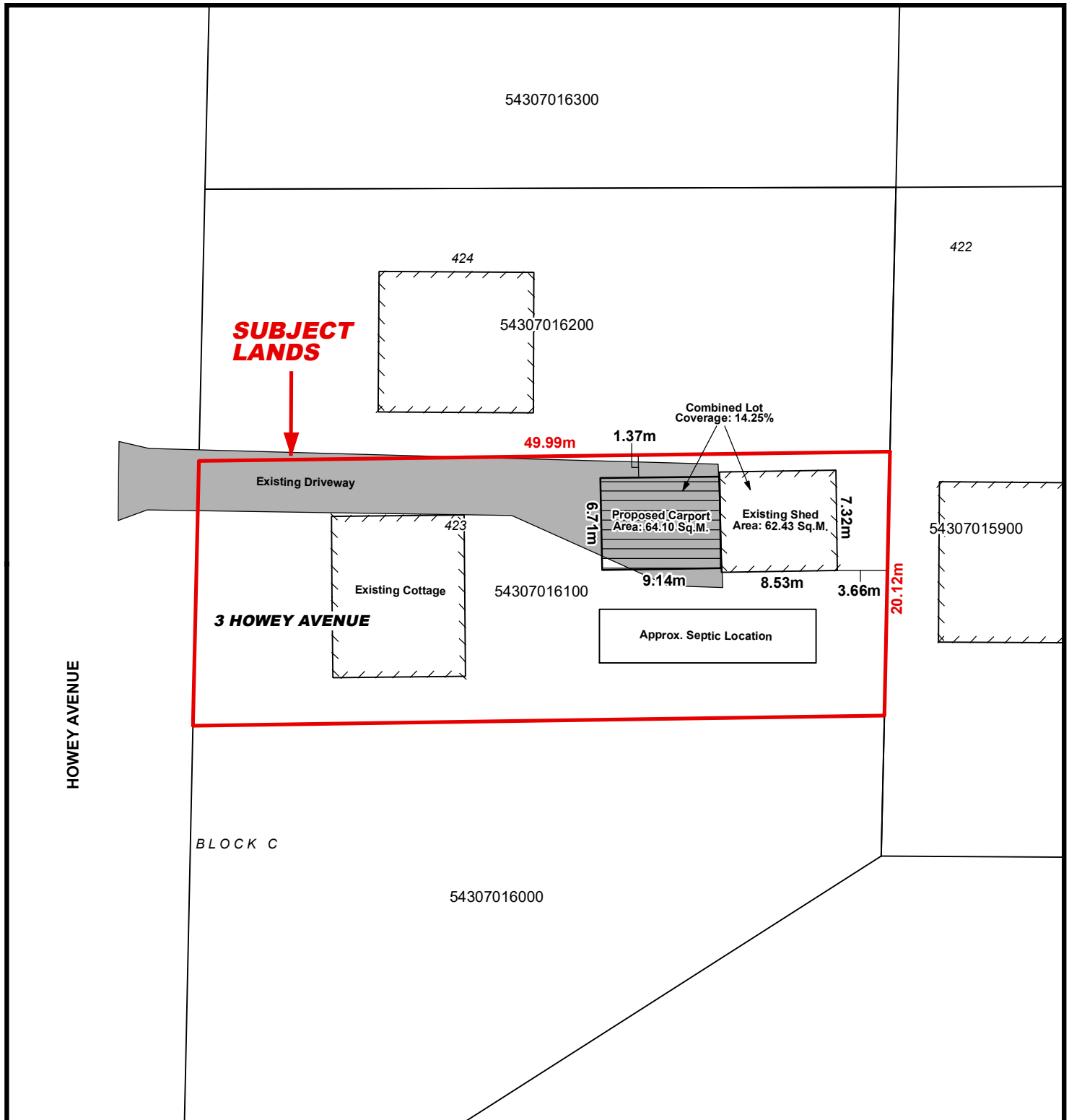
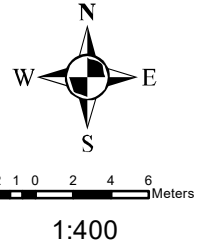




# MAP 3

File Number: ANPL2017183

Geographic Township of SOUTH WALSINGHAM



# LOCATION OF LANDS AFFECTED

File Number: ANPL2017183

Geographic Township of SOUTH WALSHINGHAM

