

For Office Use Only:

File Number	<u>ANPL2018195</u>	Application Fee	<u>\$1406</u>
Related File Number	<u>—</u>	Conservation Authority Fee	<u>—</u>
Pre-consultation Meeting	<u>Aug 13/18</u>	OSSD Form Provided	<u>Yes</u>
Application Submitted	<u>Aug 22/18</u>	Planner	<u>Steve</u>
Complete Application	<u>Aug 22/18</u>	Public Notice Sign	<u>Yes</u>

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

- ☐ Consent/Severance/Boundary Adjustment
- ☐ Surplus Farm Dwelling Severance and Zoning By-law Amendment
- ☒ Minor Variance
- ☐ Easement/Right-of-Way

Property Assessment Roll Number: 542.030.03300.0000

A. Applicant Information

Name of Owner Peter Knelsen.

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 3165 HWY 59

Town and Postal Code Langton NOB 1G0

Phone Number 519 403-4481

Cell Number 519-403-4481

Email _____

Name of Applicant _____

Address _____

Town and Postal Code _____

Phone Number _____

Cell Number _____

Email _____



Name of Agent

Peter Kneller

Address

3165 HWY 59

Town and Postal Code

Langton NOE1G0

Phone Number

519-403-4481

Cell Number

519-403-4481

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

☐ Applicant

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):

3165 HWY 59 Langton NOE1G0

NWAL CON 10 PT Lot 12 RP

Municipal Civic Address: 3165 HWY 59 Langton

Present Official Plan Designation(s): Agricultural

Present Zoning: Agricultural

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

☒ Yes ☐ No If yes, please specify:

Allow Trucking Business

3. Present use of the subject lands:

Residential with storage space for home occupation



4. 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- home, 1 storey 1 garage 1 shed 1 chicken coop

5. 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.

Addition to garage, used for personal storage and partly for home occupation storage of materials

6. 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:

7. 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:

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

+/- 9 years

9. Existing use of abutting properties:

Agricultural and rural residential

10. 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 ² or %, etc.		
Lot frontage	_____	_____
Lot depth	_____	_____
Lot width	_____	_____
Lot area	_____	_____
Lot coverage	_____	_____
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):

144 sq.m from the max 200 sq.m accessory building useable floor area to permit 344 sq.m.

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

Pick-up
Storage of personal truck and materials for eaves trough home occupation in part of addition
Requires greater area than By-law allows

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): 2.94 AC

If a boundary adjustment, identify the assessment roll number and property owner of the lands to which the parcel will be added: Peter Knetsen

542,030,03300,0000

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. 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: 2.94 AC.

Workable Acreage: 1.25 AC.

Existing Farm Type: (i.e., corn, orchard etc) _____

Dwelling Present?: ☐ Yes ☐ No If yes, year dwelling built _____

Owners Name: Peter Knelsen

Roll Number: 542,030,03300,0000

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.):

Home occupation - eaves trough business, storage on site

2. Is there reason to believe the subject lands may have been contaminated by former uses on the site or adjacent sites? ☐ Yes ☒ No ☐ Unknown

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

Personal knowledge



4. 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:

Addition to existing building

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:

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 chickens (~100) Since 2009

Wooded area

☐ On the subject lands or ☒ within 500 meters – distance ~100m

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 home occupation

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 ~200m



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 checked="" type="checkbox"/> Individual wells | <input type="checkbox"/> Other (describe below) |
-

Sewage Treatment

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

Storm Drainage

- | | |
|---|--|
| <input type="checkbox"/> Storm sewers | <input checked="" type="checkbox"/> Open ditches |
| <input type="checkbox"/> Other (describe below) | |
-

2. Existing or proposed access to subject lands:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Municipal road | <input type="checkbox"/> Provincial highway |
| <input type="checkbox"/> Unopened road | <input type="checkbox"/> Other (describe below) |

Name of road/street:

Highway 59

G. Other Information

1. Does the application involve a local business? ☒ Yes ☐ No

If yes, how many people are employed on the subject lands?

home occupation - owner is only employee

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.



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.

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.

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.

Peter Krueger
Owner/Applicant/Agent Signature

Aug. 22/18
Date

J. 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

leave blank until submitting.

K. Declaration

I, Peter Knelsen of Norfolk County

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

Peter Knelsen

Owner/Applicant/Agent Signature

In Norfolk County

This 22nd day of August

A.D., 20 18

[Signature]
A Commissioner, etc.

Steven James Collier,
a Commissioner, etc., Province of Ontario,
for the Corporation of Norfolk County.
Expires April 3, 2021.





Zoning Deficiency

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

PROPERTY INFORMATION

Address: 3165 Highway 59

Legal Description:

Roll Number: 54203003300

Application #:

Information Origins: site plan provided by applicant. Information also collected from site plan in file associated with permit PRBD20112127

Agricultural Zone (A)

		REQUIRED	PROPOSED	DEFICIENCY	UNITS
3.2.1	a) building height	6.00		N/A	m
	b) minimum front yard	13.00		N/A	m
	c) minimum exterior side yard	6.00		N/A	m
	d) minimum interior side yard	10.00		10.00	m
	e) minimum rear yard	10.00		10.00	m
	f) through lot distance to street line	6.00		N/A	m
	g) Lot coverage (Note: Proposed Area)				
	i) lot coverage	10.00	3.00	N/A	%
	ii) usable floor area	200.00	344.00	144.00	m.sq
3.36	Surplus Farm Dwelling Severance				
		200.00		N/A	m.sq
	b) existing accessory buildings/structures				

Comments

10.0m set back required for home industry from any interior lot line. A home industry cannot exceed 100 sqm useable floor area of an accessory building. Applicant states that his proposed eaves trough business will not exceed this useable floor area. Note: a trucking business has been previously approved to be operated on this property through special provision 14.270. The accessory structure is only to be used for what has been approved and what is permitted.

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.

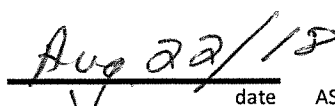
Prepared By:

Roxanne Koot

I have read and understand the above.



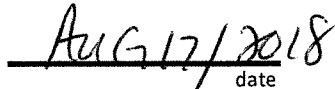
Signature of owner or authorized agent

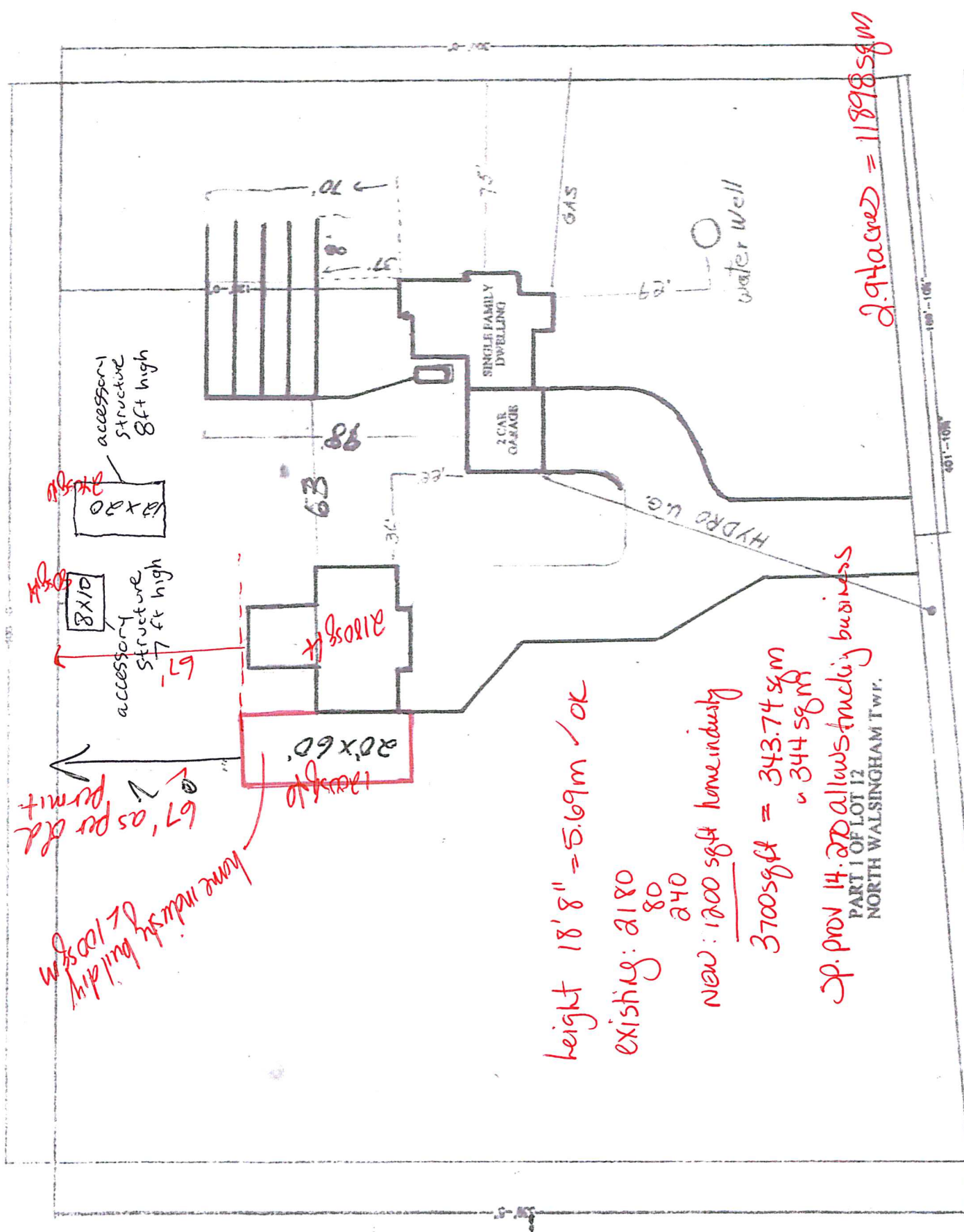

date

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



Signature of Zoning Administrator

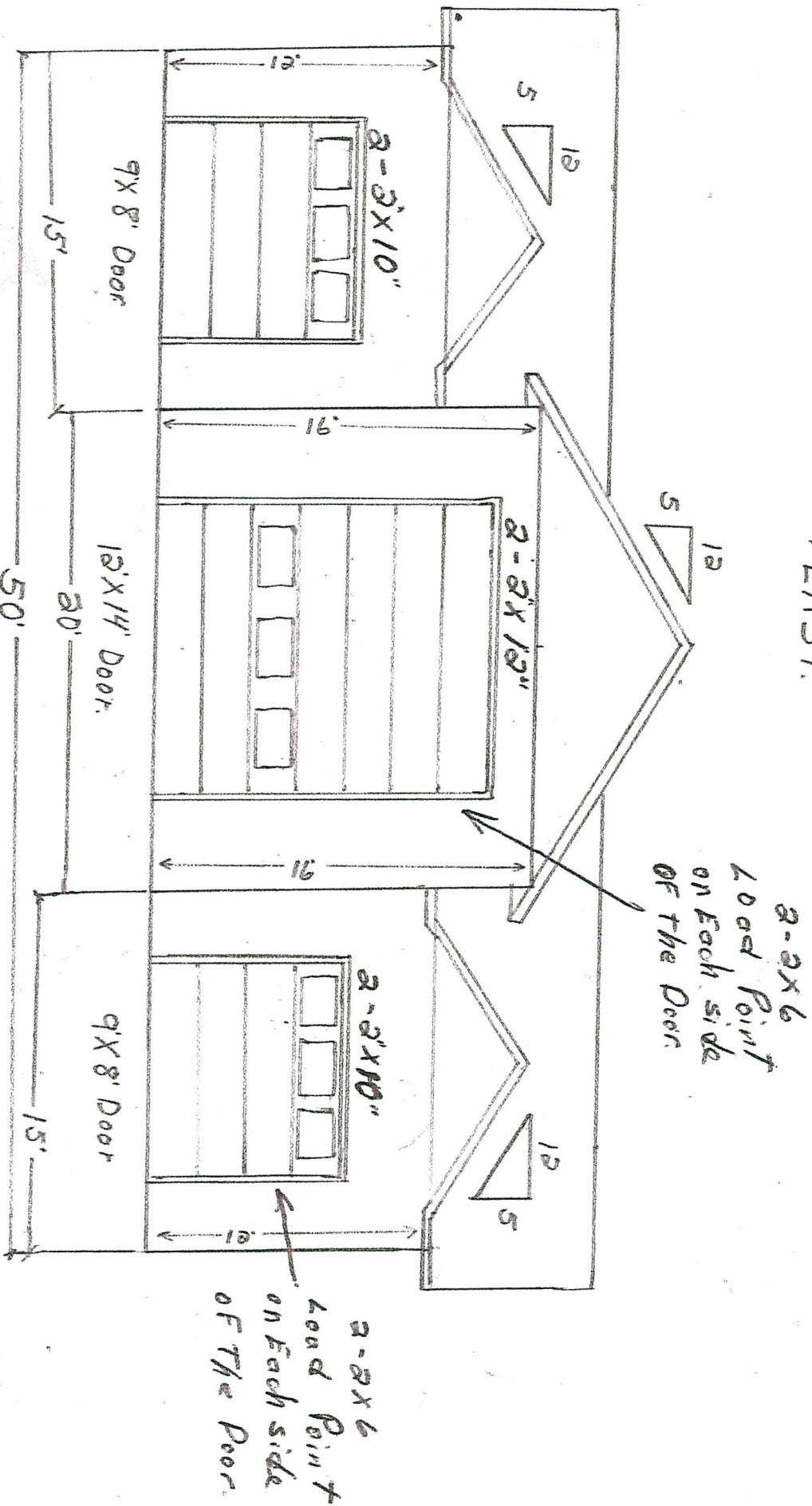

date



Existing

3165 Hwy 59
Langton NOE 160

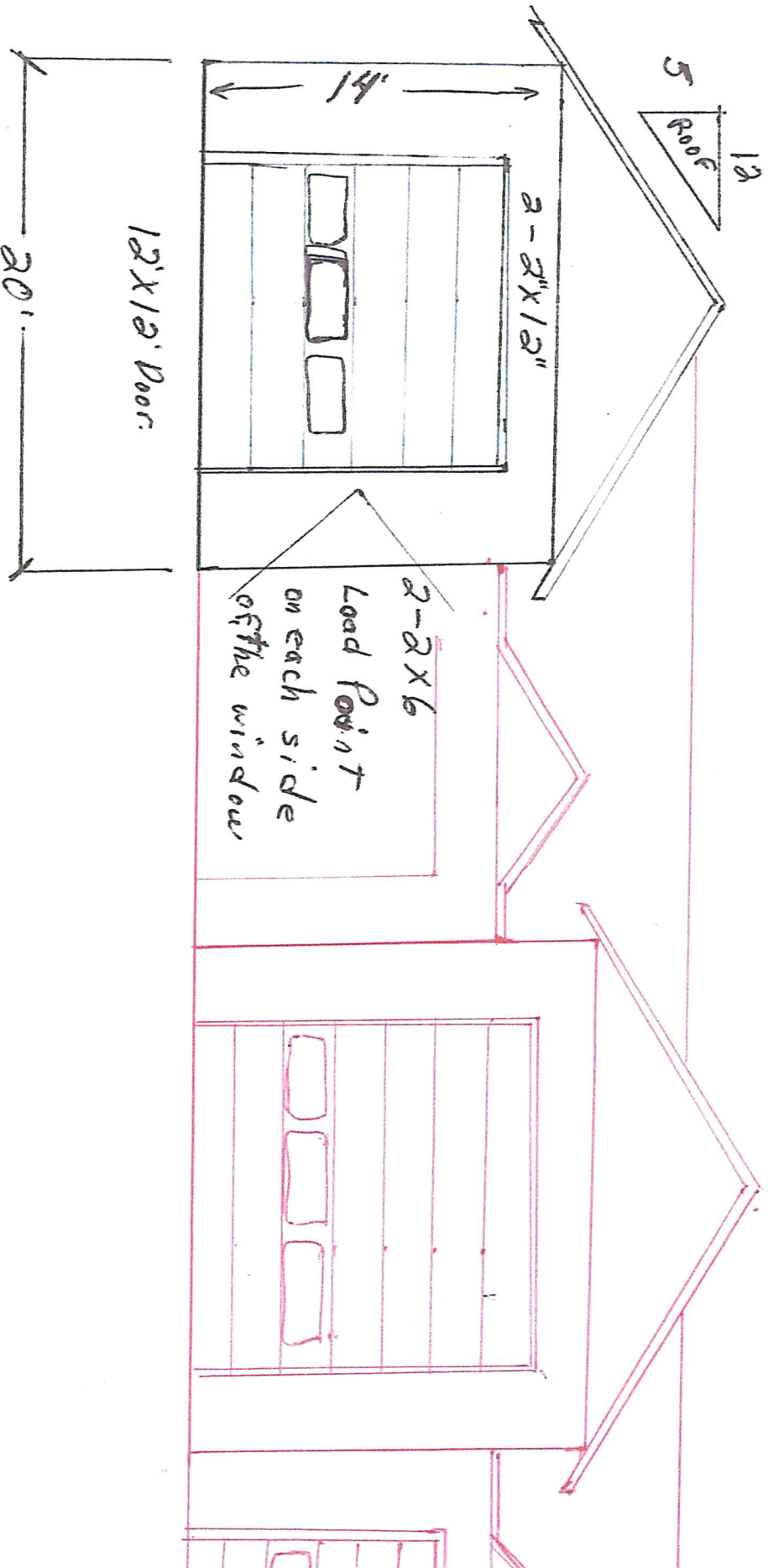
EAST.

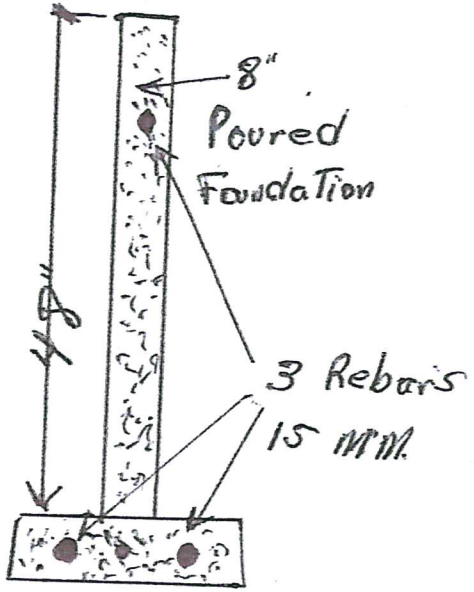


EAST

NEW

The Red. is
Existing





6x18" Footing
on undisturbed soil

The Red is
Existing

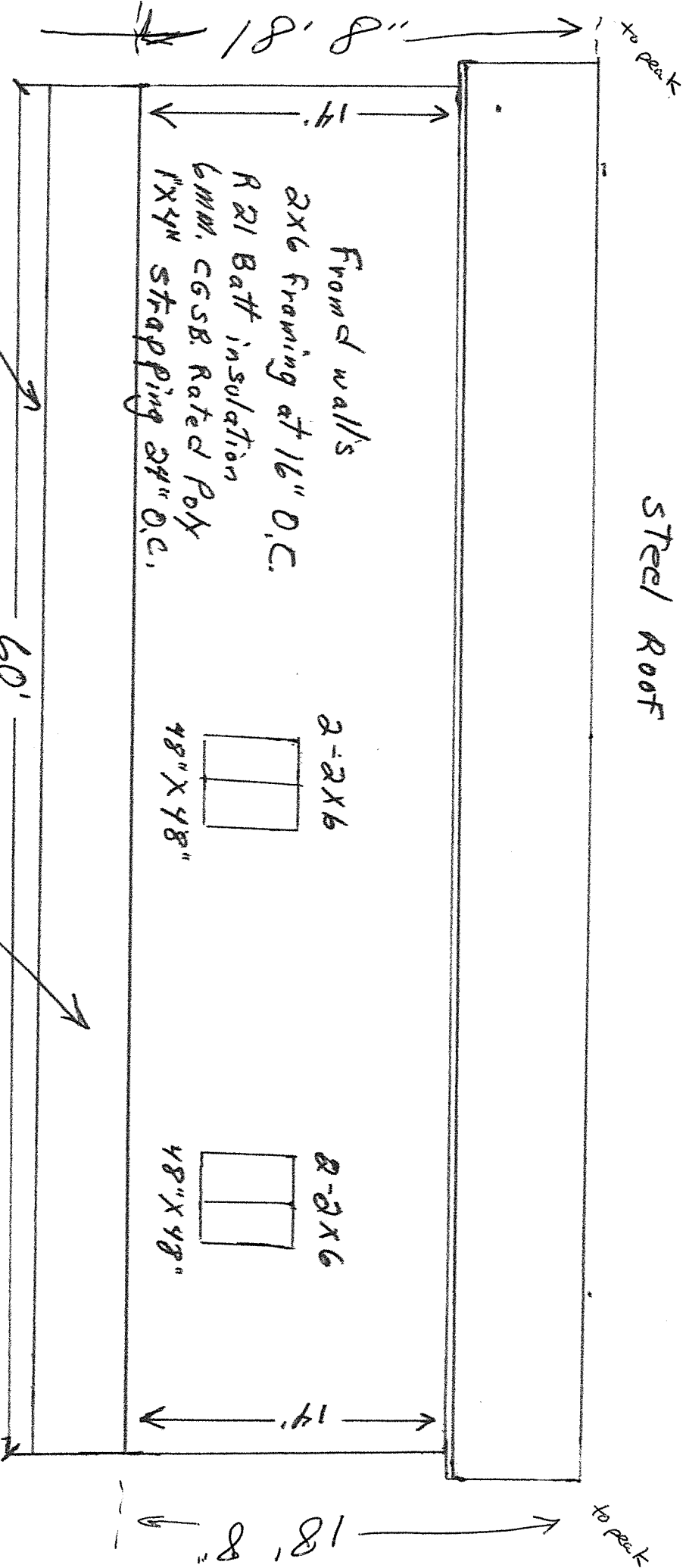
NEW

The Red is
Existing



South.

Roof Trusses 24" O.C.
2"X4" strapping 24" O.C.
Steel Roof



6"X18"
Footing

60'

8" X 48" H
Foundation



Working together with our community
to provide quality services.

Evaluation Form for Existing On-Site Sewage Systems

Date: July 2009

OFFICE USE ONLY		FILE No.:		DATE RECEIVED:	
PROPERTY INFORMATION		Municipal Address: <u>3165 HWY 59 Longton</u>			
Owner: <u>Peter Knelsen</u>		Lot:		Concession:	
Lot Area:		Lot Frontage:		Assessment Roll No.	
PURPOSE OF EVALUATION		<input 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:		No. of Bedrooms:		No. of Fixture Units:	
Is the building currently occupied? Yes / No If No, how long?					
EVALUATOR'S INFORMATION		Evaluator's Name: <u>Richard Millen</u>		Company Name: <u>Millen Construction</u>	
Address: <u>1507 NCR 45 Longton ON</u>		Postal Code: <u>N9E 1G0</u>		Phone: <u>519 403 8910</u>	
Email: <u>millenconstruction@gmail.com</u>		BCIN # <u>46141</u>			
SITE EVALUATION		Ground Cover (trees, bushes, grass, impermeable surface): <u>Grass</u>			Soil Type:
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>8</u> ft.	
Surface Discharge Observed: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Odour Detected: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Current Weather (at time of evaluation):	
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>1000</u> Gal.		Pump: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Distribution System: Area: <input type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium		No. of Tile Runs: <u>5</u>		Total Length of Tile: <u>300</u>	
Distance Between Tile Runs: <u>6'-0"</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		Cover: <input type="checkbox"/> Filter Cloth <input type="checkbox"/> Sand <input type="checkbox"/> Top Soil <input type="checkbox"/> Seeded	
Setbacks:		Tank		Distribution Pipe	
Distance to Buildings & Structures (ft)		<u>6'-0"</u>		<u>37'-0"</u>	
Distance to Bodies of Water (ft)		<u>N/A</u>		<u>N/A</u>	
Distance to Nearest Well (ft)		<u>120'-0"</u>		<u>140'-0"</u>	
Distance to Proposed Property Lines		Front <u>200</u> Rear <u>120</u> Side <u>100</u> Side <u>280</u>		Front <u>140</u> Rear <u>40</u> Side <u>300</u> Side <u>40</u>	

OVERALL SYSTEM RATING

- ☒ System Working Properly / No Work Required
- ☐ System Functioning / Maintenance Required
- ☐ System Not Functioning / Minor Repair Required
- ☐ System Failure/Major Repair / Replacement Required

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.

Additional Comments:

PROPOSED SLOP ADDITION, HAS NO
EFFECT ON EXISTING SYSTEM,
SYSTEM IS GOOD WORKING ORDER

VERIFICATION**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.

I, Peter Knelsner (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.

Peter Knelsner

Owner Signature

Aug. 22 / 18

Date

EVALUATOR:

1. I, Ruthann Niles 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. The undersigned takes no responsibility for the accuracy of existing or proposed property lines, whether measured or implied.

Ruthann Niles

Evaluator Signature

Aug 13 / 18

Date

BUILDING DIVISION COMMENTS

Comments: _____

I, _____ have reviewed the information contained in this form as submitted.

Chief Building Official or designate

Date

PART 1 OF LOT 12
NORTH WALSHAM TWP.

HWY. 939

401'-10 1/2"

100'-10 1/2"

HYDRO U.G.

water well

GAS

2 CAR
GARAGE

SINGLE FAMILY
DWELLING

20'x60'

accessory
structure
7 ft high

8x10

12x20

accessory
structure
8 ft high

63'

98'

1000
sq ft

37'

8'

70'

461'

300'

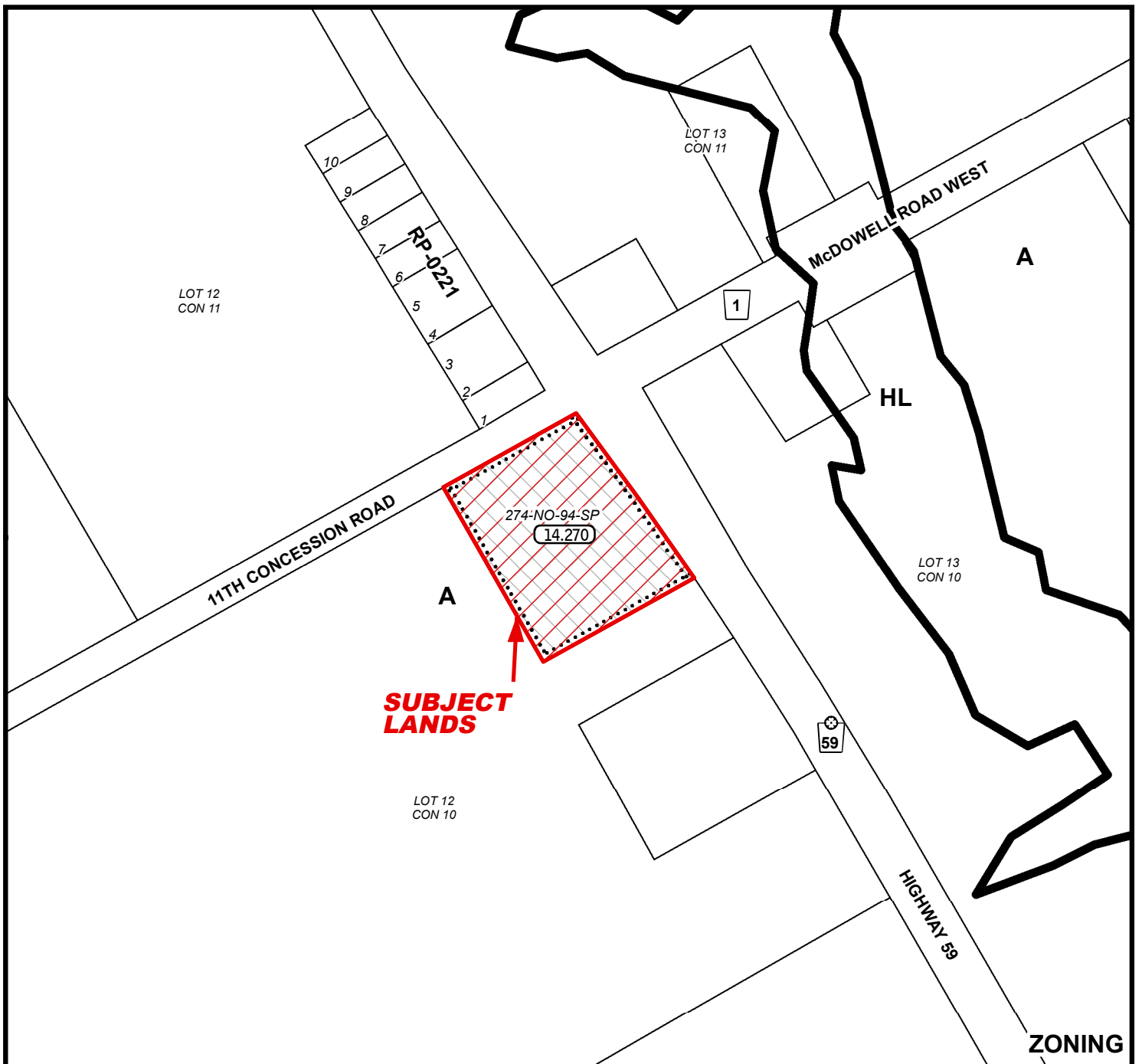
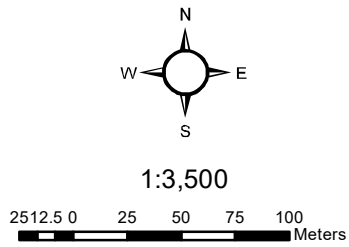
Stones
600'

410'

410'

Handwritten signature or mark.

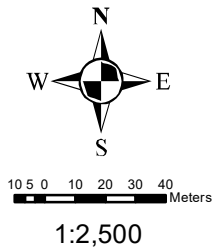
MAP 1
File Number: ANLP2018195
Geographic Township of
NORTH WALSHINGHAM



MAP 2

File Number: ANLP2018195

Geographic Township of NORTH WALSLINGHAM



MAP 3

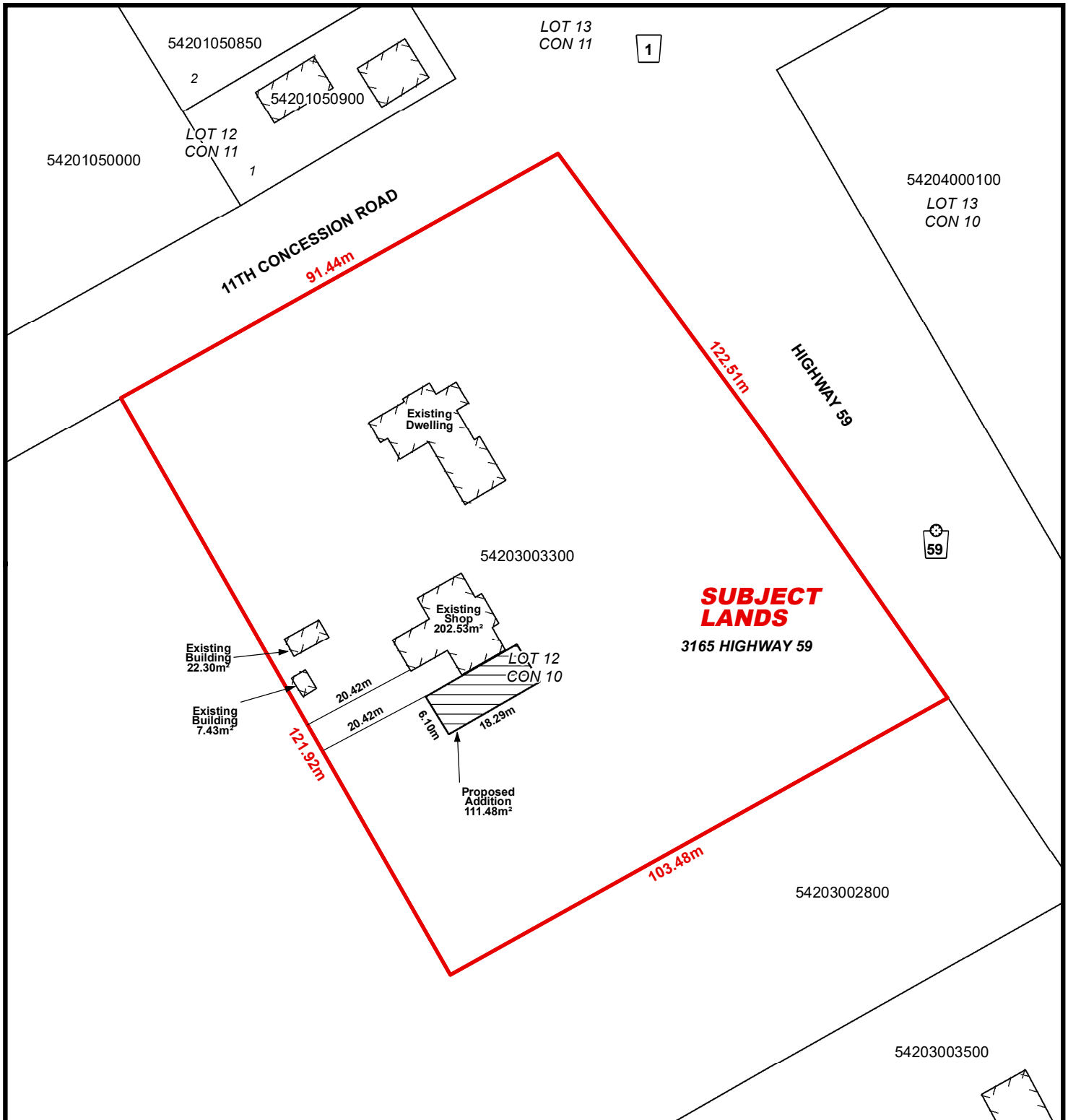
File Number: ANLP2018195

Geographic Township of NORTH WALSINGHAM



4 2 0 4 8 12 16 Meters

1:1,000



LOCATION OF LANDS AFFECTED

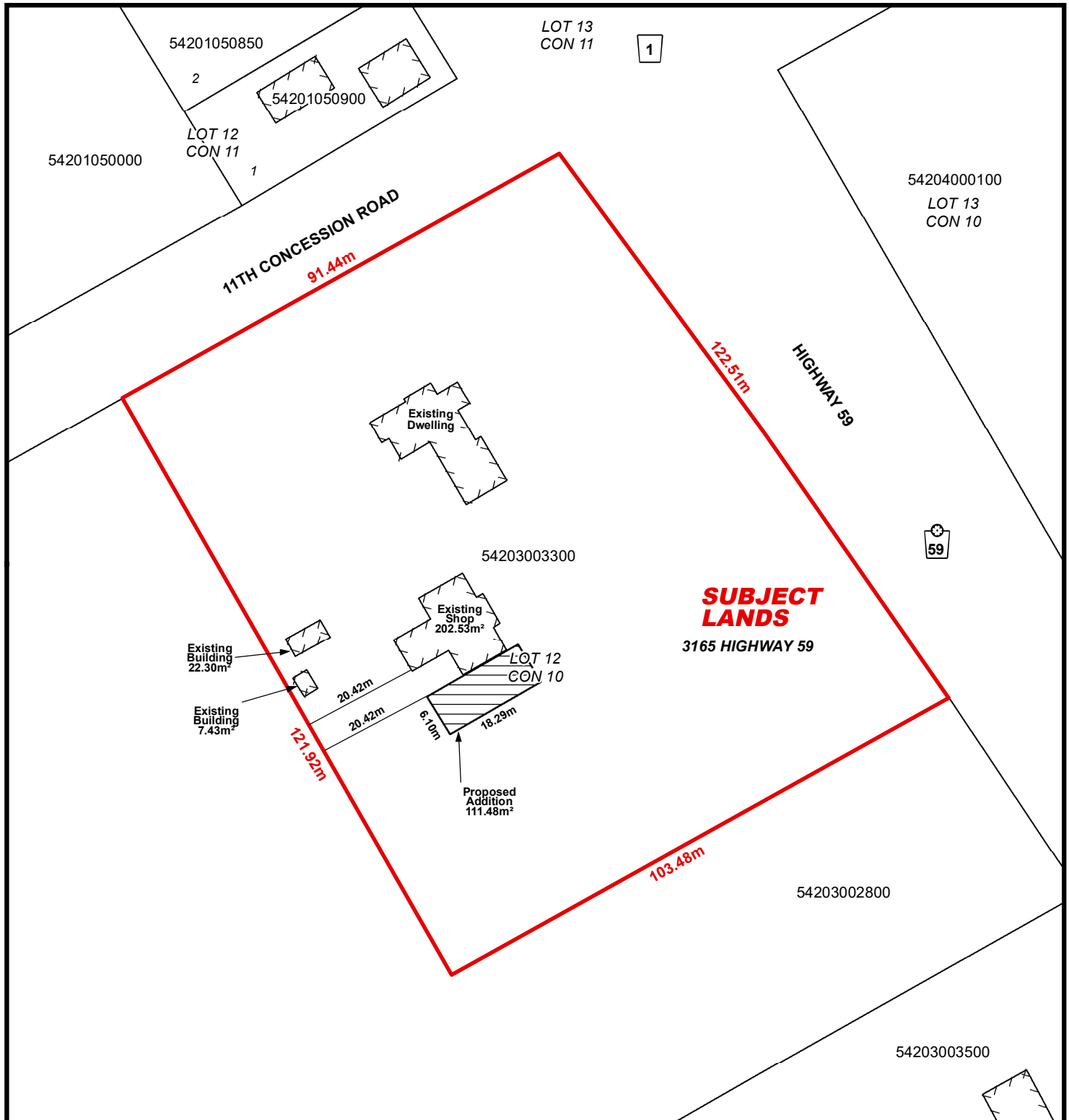
File Number: ANLP2018195

Geographic Township of NORTH WALSINGHAM



4 2 0 4 8 12 16 Meters

1:1,000



8/23/2018