TOWNSHIP OF DELHI

COMMITTEE OF ADJUSTMENT



	COMMENT REQU	UEST FORM	
Regional Planner		$\square$	Regional Health Unit
Ministry of Transpo	rtation	$\boxtimes$	Ministry of Natural Resour
Regional Engineering		X	Conservation Authority
Area Public Works	. 5 - F		Ministry of Environment
Ministry of Agricul	lture & Food e below		
	paga saa laa jadas x 4	120, 330	R
appl File The	Committee has receivation concerning  No. B-90/90-DE  proposal is explained to require further contact this office	ned on the at	your jursidiction. tached application.
In C	order to properly conittee would apprecent the date below.	iate your com	application, the . ments or recommendation
In C	order to properly conittee would apprecent the date below.	iate your com	application, the ments or recommendation
In o Comm befo	order to properly conittee would apprecate the date below.  March 2	23, 1990	application, the ments or recommendation
In C	order to properly conittee would apprecent the date below.  March 2	23, 1990	ments or recommendation
In community of the following states of the following	order to properly conittee would apprecent the date below.  March 2	23, 1990	Elaine Collinson  Or  Sally Lauszus  Secretary-Treasurer
In Community DATE:March 13,March MEETING DATE:April	March 2	23, 1990  REPLY TO:	Elaine Collinson  Or  Sally Lauszus  Secretary-Treasurer  Committee of Adjustment  Township of Delhi  P.O. Box 182,  183 Main Street,  DELHI, Ontario
In of Community DATE: March 13, In the M	March 2	23, 1990  REPLY TO:	Elaine Collinson  Or Sally Lauszus Secretary-Treasurer Committee of Adjustment Township of Delhi P.O. Box 182, 183 Main Street, DELHI, Ontario N4B 2W9  (519) 582-2100

FORM 1

0001 A 1 8AM 1 1990

# THE PLANNING ACT TOWNSHIP OF DELHI

#### APPLICATION FOR CONSENT

1.	Name of Owner Don MCTADON	Phone No. 446-310
	Address RX#3 SCOTLAND ONT	Postal Code NOS IRO
2.	Owner's Solicitor or authorized agent	THE SERVICE CONTRACTOR
		Postal Code
	Please specify to whom all communications be sent:	AND PARCET BELL CALL
	owner /W solicitor / / agent / /	
3.	a) Type and purpose of proposed transaction:	
	/ Conveyance // Other, please specify	
	b) Name of person(s) to whom land or interest in land is	to be conveyed, leased or
	mortgaged	- TO
	c) Relationship (if any) or person(s) named in (b) to own	er
4.	Location of Land: Former Township WINDHAM 7	-c.110.
	Town or Village KELVIN	
	Lot & Concession /3 /	
_	Lot & Reg. Plan No. SOB	
5.	Number of new lots (not including retained lots) proposed	1
6.	Date of purchase of subject lands	
7.*	How many years has owner farmed?	d
8.	Dimensions of land intended to be SEVERED:	
	FRONTAGE: lele DEPTH: 3 cc'	AREA: 19800
	Existing Use	ENTITLE .
	Number and type of buildings and structures $\underbrace{\text{existing}}_{\text{Nonie}}$ on la	nd to be severed:
	Number and type of buildings and structures <u>proposed</u> on la	nd to be severed:
	Date of construction of any existing dwelling	
9.	Dimensions of land intended to be RETAINED:	80 18388-1809SR
		ADEA.
	Existing Use RESIDENTIAL Proposed Use	AREA: 30 000
	Number and type of buildings and structures existing on the	TENTIAL
	1 House	e land to be retained:
	Date of construction of any existing dwelling $\frac{C_{C7}}{C}$	100
10.	a) Access to land intended to be SEVERED:	787
	// unopened road // open Municipal Road // Re	rianal Davi
	// Provincial Highway // other (specify)	gronal koad
	Name of Road/Street	76
	b) Access to land intended to be RETAINED:	
	// unopened road / / open Municipal Road / / Re	a sciant
	// Provincial Highway // other (specify)	gional Road
	Name of Road/Street	
	The state of the s	

11.	Services (proposed):
	/ / Munic. i Water & Sewer / / Municipal Water Private Sewage System
	// Municipal Sewer & Well / Private Sewage System & Well
	/ / Other (specify)
12.	Is any part of the land swampy or subject to flooding, seasonal wetness or erosion: If yes, give details みりむ
13	Has the owner previously severed any land from this land holding or any other land
•••	within the Region of Haldimand-Norfolk? // Yes / W No
	If the answer to the above question is yes,
	How many separate parcels have been created?
	Date(s) these parcels were created
	Previous File No.
	For what uses?
	Show parcels on the required sketch.
14.	If this application is in regards to the severance of a dwelling made surplus through farm amalgamation, when were the farm properties amalgamated?
15.	Has the parcel intended to be severed ever been, or is it now, the subject of an application for a plan of subdivision under Section 50 of the Planning Act, 1983, or its predecessors?
	// Yes // No
16.	Is the owner, solicitor or agent applying for additional consents on this holding simultaneously with this application or considering applying for additional consents in the future?
	/ / Yes / WNo
	If yes, give File No.
17.	Is the owner, solicitor or agent applying for any minor variance or permission to extend or enlarge under Section 44 of the Planning Act, 1983, in relation to any land that is the subject of this application?
	/
	If yes, give File No. <u>A 17/90 - DE</u>
	Dated at the Laurekip of 1/Pihi
	Dated at the January of 1000 hi this 5 day of March, 1990.
	May for mi talde
	(signature of applicant, agent or solicitor)
	·

#### NOTES:

- If this application is signed by an agent or solicitor on behalf of an applicant, the owner's written authorization must accompany the application. If the applicant is a corporation acting without an agent or solicitor, the application must be signed by an officer of the corporation and the corporation's seal (if any) must be affixed.
- It is required that one copy of this application be filed together with the same number of copies of the sketch, with the responsible person, accompanied by a fee of \$265.00 in cash or by cheque made payable to the Township of Delhi.
- If this application involves an agricultural parcel, please complete Page 3. Planner's assistance is available in completing the form.

MAIL TO: Township of Delhi

183 Main Street, Box 182

Delhi, Ontario

N4B 2W9

PHONE:

(519) 582-2100

1-800-265-2824

reflects	ent po	licies pes of	residentia	lifferent lo l lots whic l is availab	h fall withi	is important that the nature n the severance criteria for	e of the app the rural/	lication be specified. The agricultural area, togethe	ne following listing er with estate residen
Please c 1. One 2. Esta 3. Surp 4. Infi	ot fro e lot us far	m a far m house	m holding			<ol> <li>Residential lot involved</li> <li>Existing second derlling</li> <li>Dwelling separated from</li> </ol>	from a non-	-viable rural property	e in the rural area.
. If the lo involved certifica	in the	is a " farm o	one lot fr peration.	om a farm ho Properties	olding" or a located in	n "infilling lot", please li other area municipalities MU	st <u>all prop</u> JST be includ	erties owned and rented by ded. Roll numbers can be o	the applicant which obtained from your tax
certifica									
ssessment		Conc.	Twnsp.	Total Acreage (indiv. property)	Acres Workable (indiv. property)	Owners Name and Address (including those with part interest)	Tenure (rented/ owned)	Existing Farm Type (individual property) (eg. corn production, orchards, tobacco)	Existing Building(s (eg. farm house, dairy barn, kilns)
ssessment		Conc.	Twnsp.	Acreage (indiv.	Workable (indiv.	(including those with	(rented/	(individual property) (eg. corn production,	(eg. farm house,
ssessment		Conc.	Twnsp.	Acreage (indiv.	Workable (indiv.	(including those with	(rented/	(individual property) (eg. corn production,	(eg. farm house,
Assessment Roll No.*		Conc.	Twnsp.	Acreage (indiv.	Workable (indiv.	(including those with	(rented/	(individual property) (eg. corn production,	(eg. farm house,

RESIDENTIAL LOT IN A RURAL/AGRICULTURAL AREA

INFORMATION FORM

FILE NO.

APPLICANT:

(first name)

LOT SIZE CREATED

PDG:F0304-7a

ASSESSMENT ROLL NO.

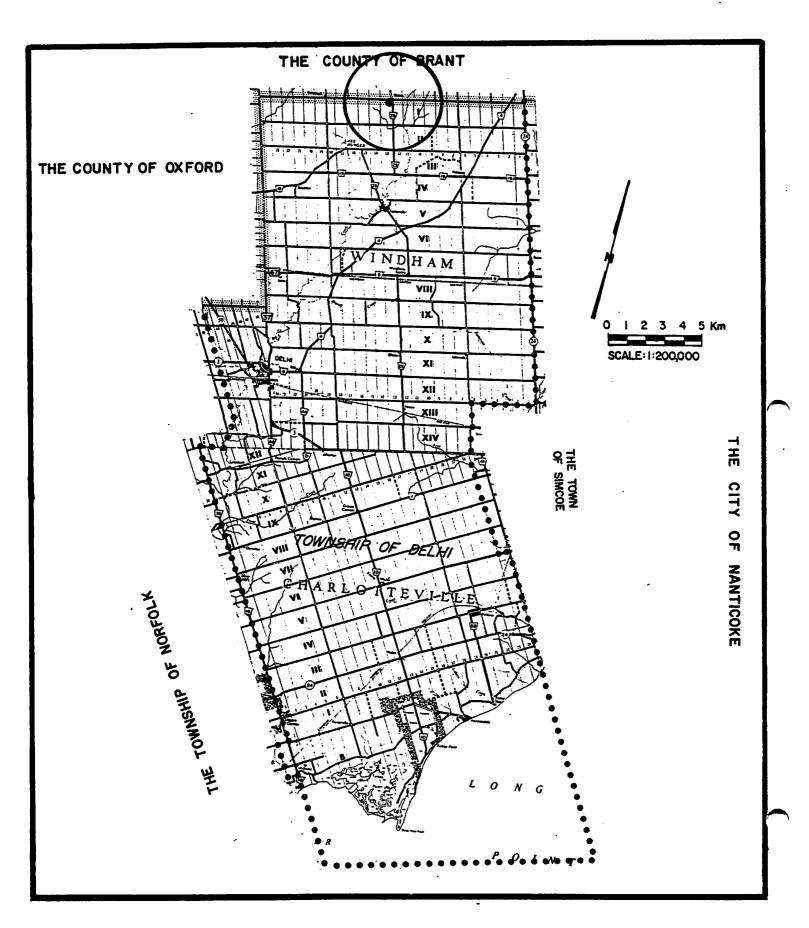
I, MARY O MEFADDER	in the Right
of childinand- Bufolk	
solemnly declare that:	
all of the above statements and the state mitted herewith are true and I make this it to be true and knowing that it is of toath.	ments contained in all of the exhibits trans- solemn declaration conscientiously believing he same force and effect as if made under
Declared before me at the	
Muniship of Wilhi	
in the Riginia }	
of g-falding id. Profolk	<i>.</i>
this 5 day of Mouch	Man Ken Metalda

A Commissioner, etc.

A.D. 19 %).

NOTE: Each copy of the application must be accompanied by a sketch showing:

- a) abutting land owned by the grantor, its boundaries and dimensions;
- the distance between the grantor's land and the nearest township lot line or appropriate landmark (e.g. bridge, railway crossing, etc.);
- c) the parcel of land that is the subject of the application, its boundaries and dimensions, the part of the parcel that is to be severed, the part that is to be retained and the location of all previously severed land;
- d) the appropriate location of all natural and artificial features on the subject land (e.g. buildings, railways, highways, watercourses, drainage ditches, banks, slopes, swamps, wooded areas, wells and septic tanks) and the location of any of these features on adjacent lands which may affect the application;
- e) the use of adjoining land (e.g. residential, agricultural, cottage, commercial, etc.);
- f) the location, width and names of all road allowances, rights-of-way, streets or highways within or abutting the property, indicating whether they are public travelled roads, private roads, rights-of-way or unopened road allowances;
- g) the location and nature of any restrictive covenant or easement affecting the subject land;
- h) if the severed parcel is to be conveyed to an abutting property owner, please identify the abutting property with name and instrument number exactly as now registered.



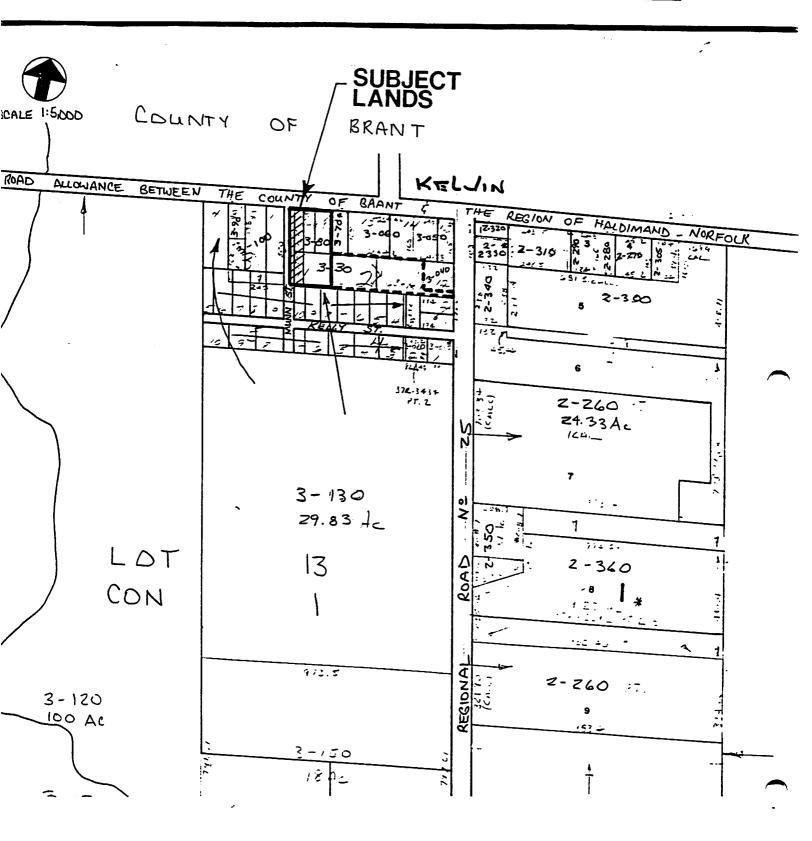
# MAP Nº Z TO FILE NUMBER &-17-90-DE

FORMER MUNICIPALITY: WINDHAM

COUNTY	SUBJECT LANDS OF 5-0	BE-90 BRANT	SCALE 1:5,000
	IR RH J	RH KELVIN BOUNDARY	
	A 13 CONCESSION	REGIONAL ROAD NO. 25	A I2

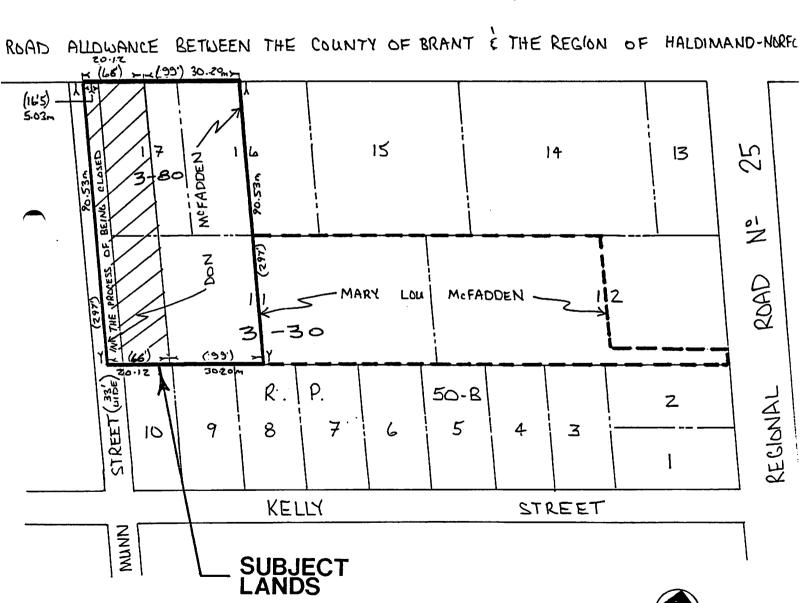
# MAP Nº 3 TO FILE NUMBER A-17-90-DE

FORMER MUNICIPALITY: WINDHAM



# MAP Nº 4 TO FILE NUMBER B-90-90-DE

FORMER MUNICIPALITY: WINDHAM



SCALE 1:1250

### TOWNSHIP OF DELHI

## COMMITTEE OF ADJUSTMENT

### COMMENT REQUEST FORM

	•		
X	Regional Planner	$\overline{\Sigma}$	Regional Health Unit
	Ministry of Transportation	X	Ministry of Natural Resources
<b>S</b>	Regional Engineering Department	X	Conservation Authority
	Area Public Works		. Ministry of Environment
-	Ministry of Agriculture & Food  ** see note below		·
•	This Committee has received application concerning land application concerning land appreciate to contact this office.  In order to properly concerning to contact the date below.	d on the at nformation, sider this	tached application.  please feel free  application, the
	March 26	, 1990 	
D	ATE: . March 13, 1990	REPLY TO:	Elaine ·Collinson
R	EPORT DATE: March 23, 1990		Sally Lauszus Secretary-Treasurer Committee of Adjustment
M	EETING DATE: April 6, 1990		Township of Delhi P.O. Box 182, 183 Main Street, DELHI, Ontario N4B 2W9
7	NOTE: Agriculture & Food	TELEPHONE:	(519) 582-2100 Zenith 43550
•	Comment on Viability		
	State M.D.S. Formula Applicabl	e if intens	ive animal operation nearby
	Retirement Lot	•	- -
	**************************************	<b>:</b> •	•
	•		

	the state of the s		ν ι	1110 -	-
AREA:	**************************************	FILE NO.	$\mathcal{H}_{\perp}$	11/90 DO	=

### FORM 1

### THE PLANNING ACT

# COMMITTEE OF ADJUSTMENT TOWNSHIP OF DELHI

### APPLICATION FOR MINOR VARIANCE OR FOR PERMISSION

	The undersigned hereby applies to the Committee of of Delhi under Subsection 44 of The Planning Act, in this application, from By-law No.	1983 for relief as described
1.		Phone No. <u>.146-3124</u>
	Address RR #3 SCOTEANS	Postal Code NOF IRO
2.	Name of Agent	Phone No.
	Address	Postal Code
	NOTE: Unless otherwise requested, all communication	ons will be sent to agent.
3.	Names and address of any mortgagees, holders of charge and address of any mortgagees, holders of charges and address of any mortgagees.	
4.	Nature and extent of relief applied for:	
5.	Why is it not possible to comply with the provision PROPOSED FRONTAGE IS TOO SM	
6.	Legal description of subject lands (lot and conces ship and registered plan number where applicable,	sion number or lot, former town- street and street number):
7.		
	Frontage 66' Depth 300'	Area <u>/ 9. 800</u>
	Width of Street	
8.	Particulars of all buildings and structures on or (specify ground floor area, gross floor area, numb etc.):	proposed for the subject lands er of storeys, width, length
	Existing:	
	NONE	
	Proposed ,	
	1 House	

	distance from side, rear and front lot lines):  Existing
	nic në
	Proposed
	SIFE ATTOCHED SKETCH
10.	Date of purchase of subject lands:
11.	If an addition to existing building is proposed, what will it be used for? $\frac{N}{d}$
2.	Date of construction of all buildings and structures on subject lands;
3.	Existing uses of the subject property:
	Existing uses of abutting properties: RESIDENTIAL + CENTERY
5.	Length of time the existing uses of the subject property have continued:  - APROX. 1938
6.	Municipal services available: Water Connected Connected Connected Sanitary Sewer Connected Storm Sewers
7.	What is the subject property presently zoned:
8.	Has the owner previously applied for relief in respect of the subject property?  Yes No
•	If yes, describe briefly:
9.	Is the subject property the subject of a current application for consent to sever under Section 52 of The Planning Act, 1983?
	Yes No .
	If yes, give File No.
	Signature of applicant or authorized ager
	Signature of applicant or authorized ager
ated	dat the Nachthy of Allhi this 5
ay d	of March 19 90.
OTE:	: The applicant shall attach to each copy of this application, a plan showing the dimensions of the subject lands and of all abutting lands and showing the location, size and type of all buildings and structures on the subject and abutting lands, and where required by the Committee of Adjustment, such plan shall be signed by an Ontario Land Surveyor.
	It is required that one copy of this application be filed together with a copy of a sketch, with the responsibile person, accompanied by a fee of \$240.00 in cash or by cheque made payable to the Township of Delhi.
OTE	: A completed "Zoning Deficiency Form" <u>must</u> accompany this application - obtained from the Building Inspector.

1, MARY Low. M. P. SOED of the	Toux L. p
of <u>Ollki</u> in the	& Rigura
of Hald mand- Protalk solemnly	leciare that all the statements
contained in this application are true and I make	this solemn declaration
conscientiously believing it to be true and knowing	ng 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 the	
Township of Deale	
in the <u>Electrin</u>	
of Haldingend-Antolh,	May Land Take
this day of }	
<u>March</u> 19 <u>90.</u>	·
,	

A Commissioner

MAIL TO: Committee of Adjustment Township of Delhi P.O. Box 182 183 Main Street Delhi, Ontario N48 2W9

PHONE: (519) 582-2100 Or

1-800-265-2824

# REGIONAL "IUNICIPALITY OF HALDIMAND "ORFOLK DEPAR. JENT OF PLANNING & DEVELO, MENT

**BUILDING DIVISION** 

PROPOSAL	FAILS TO	MEET D	<b>EVELOPMENT</b>	STANDARDS
FNOFOGAL	I WIEG I O	INITELL	LA LLOUINILIA I	SIMIDANDS

Assessment Roll #		مب ونند Municipality	e Del Fill
Owner/Applicant <u>Town which</u> Location of Property: Lot <u>11.16</u> , 17	7 Conc	Block 7-	Plan 50 mg
Part Reference Pla	ın Forme	r Municipality Ks	1/12
Civic Address			
Applicable Land Use By-Law	- 26 - 80	(Sena	rate sheet for each Rv-I aw
Current Zoning <	Proposed Use		
DEVELOPMENT STANDARDS	REQ'D	PROPOSED	DEFICIENCY
a) Lot Area			
b) Lot Frontage	99	66	33
c) Front Yard Setback			
d) Exterior Side Yard e) Interior Side Yard (Rt)			
(Facing Building)  f) Interior Side Yard (Lt)			
•	<del></del>		_
<b>.</b>			<del>-</del>
h) Dwelling Unit Area			
i) Landscape Open Space			
j) % Lot Coverage			
k) Height of Building	<u> </u>		-
I) Houses Per Lot			-
m) Accessory Bldg.			
n) Other Standards (specify)			
0)			-
The above "PROPOSED" information is only in respanding and information is only in respanding all applicant/owner from obtaining all Building Permit, etc.  The owner/applicant take full responded on this form.  Signatures:	pect to "Zoning" (Minor Va other permits and/or appr	ariance, Zone Change, et ovals, such as Health A acy of the above noted	tc.) and does not relieve the pproval, Entrance Permits,
Distribution of Forms		•	
Original to Applicant/Owner Duplicate to Secretary Committ	ee of Adjustment		

- Triplicate to Area Building Inspector
- The owner/applicant should present this form to the Regional Planner or the Secretary, Committee of Adjustment. The contact in this regard is:

	NAME	ADDRESS	
Should you wish an appe	ointment please call either	the Region at 587-4911 or	
White — Applicant	Yellow	· Land Division	Pink — Building Division File