

CONSENT / SEVERANCE

File Number BNPL2014081
 Related File Number _____
 Pre-consultation Meeting On May 7/2014
 Application Submitted On May 7/2014
 Complete Application On May 8/2014

Application Fee _____
 Conservation Authority Fee _____
 OSSD Form Provided _____
 Sign Issued May 8/2014

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: 3310-336 010 63000 0000

- | | |
|--|--|
| <input type="checkbox"/> Creation of a new lot | <input type="checkbox"/> Boundary adjustment |
| <input checked="" type="checkbox"/> Surplus Dwelling | <input type="checkbox"/> Easement |
| <input type="checkbox"/> Farm Split (form to be completed) | <input type="checkbox"/> Right-of-way |
| <input type="checkbox"/> Other (lease / charge) | |



A. APPLICANT INFORMATION

Name of Applicant KEITH KOOPMAN Phone # 519-443-4197
 Address 4060 HWY 24 VANESSA Fax # _____
 Town / Postal Code NOE-IVO E-mail KKOOPMAN@SILOMAIL.COM
¹ If the applicant is a numbered company provide the name of a principal of the company.

AGENT INFORMATION

Name of Agent DIANE KOOPMAN Phone # 519-443-5325
 Address 4060 HWY 24 VANESSA Fax # _____
 Town / Postal Code NOE-IVO E-mail KKOOPMAN@SILOMAIL.COM

OWNER(S) INFORMATION Please indicate name(s) exactly as shown on the Transfer/Deed of Land

Name of Owner ² KEITH MATTHEW KOOPMAN Phone # 519-443-4197
 Address 4060 HWY 24 VANESSA Fax # _____
 Town / Postal Code NOE-IVO E-mail kkoopman@silomail.com

² 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 ³: ☒ Applicant ☒ Agent ☒ Owner

³ 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:

B. LOCATION/LEGAL DESCRIPTION OF SUBJECT LANDS

Geographic Township	<u>Townsend</u>	Urban Area or Hamlet	
Concession Number	<u>4</u>	Lot Number(s)	<u>1 and 2</u>
Registered Plan Number	<u>37R-9714</u>	Lot(s) or Block Number(s)	<u>1 and 2</u>
Reference Plan Number		Part Number(s)	
Frontage (metres/feet)	<u>715 m</u>	Depth (metres/feet)	<u>340m</u>
Width (metres/feet)		Lot area (m ² / ft ² or hectares/acres)	
Municipal Civic Address	<u>25 Conc. 5</u>		

For questions regarding requirements for a municipal civic address please contact NorfolkGIS@norfolkcounty.ca.

To obtain your municipal civic address for the severed lands please contact your local building inspector.

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):

Sever a

SURPLUS FARM DWELLING

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

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

If the application involves the severance of a surplus farmhouse (through farm amalgamation), please list all properties in Norfolk County, which are owned and farmed by the applicant and involved in the farm operation:

MARY
DAVE
RED
SHOP
DUBOIS
KNOW

Owners Name and Address (including those with part interest) Assessment Roll No. (obtained from your tax bill)	Geographic Township Concession and Lot #	Total Acreage (individual property)	Acres Workable (individual property)	Existing Farm Type (individual property e.g. corn production, orchard, tobacco)	Dwelling Present	Year Dwelling Built
SUBJECT LANDS 331033601063000000	CON 4 1+2 lots	60	50	CORN	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1940?
OTHER 336 010 63500.0000	CON 4 1+2	39	37	CORN	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2006
3310 336 010 345 00 000	CON 3 LOT 1	20	20	CORN	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3310 336 010 64000 0000	CON 1 LOT 1	10	8	CORN	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1950
3310 336 010 06200 0000	CON 2 LOT 3	50	45	CORN	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3310 336 010 19900 0100	CON 2 LOT 3	55	54	CORN	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	

If the application proposes to divide a farm into two smaller agricultural parcels, please complete the following:

Description of Land	Lands to be Severed	Lands to be Retained
Area under cultivation	(m ² / ft ² or hectares/acres)	(m ² / ft ² or hectares/acres)
Woodlot area	(m ² / ft ² or hectares/acres)	(m ² / ft ² or hectares/acres)

Existing crops grown (type and area)

Proposed crops grown (type and area)

Description of Existing Buildings	Lands to be Severed	Lands to be Retained
Residence	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Livestock barn	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Type of livestock		
Capacity of barn		
Manure storage	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Type of manure storage		

Description of land intended to be **SEVERED**:

Frontage (metres/feet)

54.5m

Depth (metres/feet)

94.5m

Width (metres/feet)

54.5m

Lot area (m² / ft² or
hectares/acres)

1.272 acres

PROPOSED FINAL LOT SIZE
(if boundary adjustment)

Existing use:

Proposed use: _____

Number and type of buildings and structures **EXISTING** on the land to be severed, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

Residence - 187.41m² setback 23.69m 1 1/2 storey

Implement Shed - 113.50m² setback 67.38m 4.2m ht

Implement Shed - 181.82m² setback 80m 4.5m ht

Number and type of buildings and structures **PROPOSED** on the land to be severed, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

N/A

Description of land intended to be **RETAINED**:

Frontage (metres/feet)

Irregular

Depth (metres/feet)

Irregular

Width (metres/feet)

Irregular

Lot area (m² / ft² or hectares/acres)

67+- acres

Existing use: _____

Proposed use: Farm Land

Number and type of buildings and structures **EXISTING** on the land to be retained, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

n/a

Number and type of buildings and structures **PROPOSED** on the land to be retained, please describe in metric units, the setback from the front lot line, rear lot line and side lot lines, the height of the building or structure and its dimensions or floor area:

n/a

Description of proposed **RIGHT OF WAY/EASEMENT**:

Frontage (metres/feet)	_____	Depth (metres/feet)	_____
Width (metres/feet)	_____	Lot area (m ² / ft ²)	_____

Proposed use: _____

D. PROPERTY INFORMATION

Present official plan designation(s): Agricultural

Present zoning: Agricultural (A.B.6)

Is there a site specific zone on the subject lands? A.6 - restaurant

CONSENT / SEVERANCE

Has the owner previously severed any lands from this subject land holding or any other lands the owner has interest in since August 24, 1978?

☐ Yes ☒ No ☐ Unknown

not current owner, building lot severed by previous owner
If yes, indicate the file number and the status/decision: BN-026/2007

Has any land been severed from the parcel originally acquired by the owner of the subject lands?

☐ Yes ☐ No ☐ Unknown

If yes, indicate the file number and the status/decision: _____

Number of separate parcels that have been created: _____

Date(s) these parcels were created: _____

Name of the transferee for each parcel: Brad Simon

Uses of the severed lands: Residential dwelling

If this application proposes to sever a dwelling made surplus through farm amalgamation, when were the farm properties amalgamated? 2014

Date of construction of the dwelling proposed to be severed: 1946

Date of purchase of subject lands: 2014 April 30

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

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:

General Knowledge of property

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 n/a

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:

1. a minor variance or a consent;
2. an amendment to an official plan, a zoning by-law or a Minister's zoning order; or
3. approval of a plan of subdivision or a site plan?

☒ Yes ☐ No ☐ Unknown

If yes, indicate the following information about each application: If additional space is required, attach a separate sheet.

File number: OP-NA-2004/90 Z-NA012/90
Z NPL 2011 106

Land it affects: Retained Parcel

Purpose: cite specific zoning

Status/decision: approved

Effect on the requested amendment: Site specific (permitted restaurant)

Is the above information for other planning developments applications attached? ☐ Yes ☒ No

G. PROVINCIAL POLICY

Is the requested application 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:

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

☐ Yes ☒ No

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

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 MDS 1 Calculation Form)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	___ distance
Wooded area	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	236 distance
Municipal landfill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input 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 type="checkbox"/> No	___ distance
Provincially significant wetland (class 1, 2 or 3) or other environmental feature	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	94 distance
Floodplain	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	94 distance
Rehabilitated mine site	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input 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 type="checkbox"/> No	___ distance
Active mine site within one kilometre	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input 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 type="checkbox"/> No	___ distance
Active railway line	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	___ distance
Seasonal wetness of lands	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	___ distance
Erosion	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	___ distance
Abandoned gas wells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	___ distance

H. SERVICING AND ACCESS

WATER SUPPLY

Municipal piped water



SEVERED

☐

RETAINED

☐

Communal Wells	<input type="checkbox"/>	<input type="checkbox"/>
Individual Wells	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other means (describe) _____

SEWAGE TREATMENT	SEVERED	RETAINED
Municipal Sewers	<input type="checkbox"/>	<input type="checkbox"/>
Communal System	<input type="checkbox"/>	<input type="checkbox"/>
Septic tank and tile bed	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other means (describe) _____

STORM DRAINAGE	SEVERED	RETAINED
Storm Sewers	<input type="checkbox"/>	<input type="checkbox"/>
Open ditches	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other (describe) _____

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 the **RETAINED** lands:

<input type="checkbox"/> Unopened road	<input checked="" type="checkbox"/> Provincial highway
<input checked="" type="checkbox"/> Municipal road maintained all year	<input type="checkbox"/> Right-of-way
<input type="checkbox"/> Municipal road maintained seasonally	<input type="checkbox"/> Other (describe below)

If other, describe: _____

Name of road/street: _____

Existing or proposed access to SEVERED lands:

- | | |
|--|--|
| <input type="checkbox"/> Unopened road | <input checked="" type="checkbox"/> Provincial highway |
| <input checked="" type="checkbox"/> Municipal road maintained all year | <input type="checkbox"/> Right-of-way |
| <input type="checkbox"/> Municipal road maintained seasonally | <input type="checkbox"/> Other (describe below) |

If other, describe: _____

Name of road/street: _____

I. OTHER INFORMATION

Is there a time limit that affects the processing of this development application? ☐ Yes ☒ No

If yes, describe: _____

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.

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 as part of a "complete" Planning Application. 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, or
 - grass and brush exceeds twelve (12) inches
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

Date: July 2009

OFFICE USE ONLY		FILE NO.	DATE RECEIVED
PROPERTY INFORMATION		Municipal Address: 25 CONCESSION 5 TOWNSEND	
Owner: KEITH KOOPMAN	Lot: 1 + 2	Concession: CO-4	
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 checked="" 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: 1800 sq ft	No. of Bedrooms: 3	No. of Fixture Units: 2.5	Is the building currently occupied? (Yes) / No If No, how long?
EVALUATOR'S INFORMATION		Company Name:	
Evaluator's Name: KEN GILBERT		Postal Code: N0L 2A0	
Address: 3291 Deerpark Rd. Woodham Ont		Phone: 557-4582/1	
Email:		BCIN #: 13765	
SITE EVALUATION		Ground Cover (trees, bushes, grass, impermeable surface): grass Soil Type: gravel - sand mix	
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: 35' ft.	
Surface Discharge Observed: Yes (No)	Odour Detected: Yes (No)	Current Weather (at time of evaluation): Sunny 10°	
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: _____ Gal.	Pump: Yes (No)
Distribution System: Area: <input checked="" type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium		No. of Tile Runs: 4	Total Length of Tile: 400' Distance Between Tile Runs: 6'
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 checked="" type="checkbox"/> Top Soil <input type="checkbox"/> Seeded
Setbacks:		Distribution Pipe	
Distance to Buildings & Structures (ft): 2'		75'	
Distance to Bodies of Water (ft): 750'		650'	
Distance to Nearest Well (ft): 32'		70'	
Distance to Proposed Property Lines: Front 110' Rear 150' Side 90' Side 90'		Front 60' Rear 100' Side 15' Side 150'	



On Site Sewage Disposal System Location Plan

DATE: Mar 1 / 2014

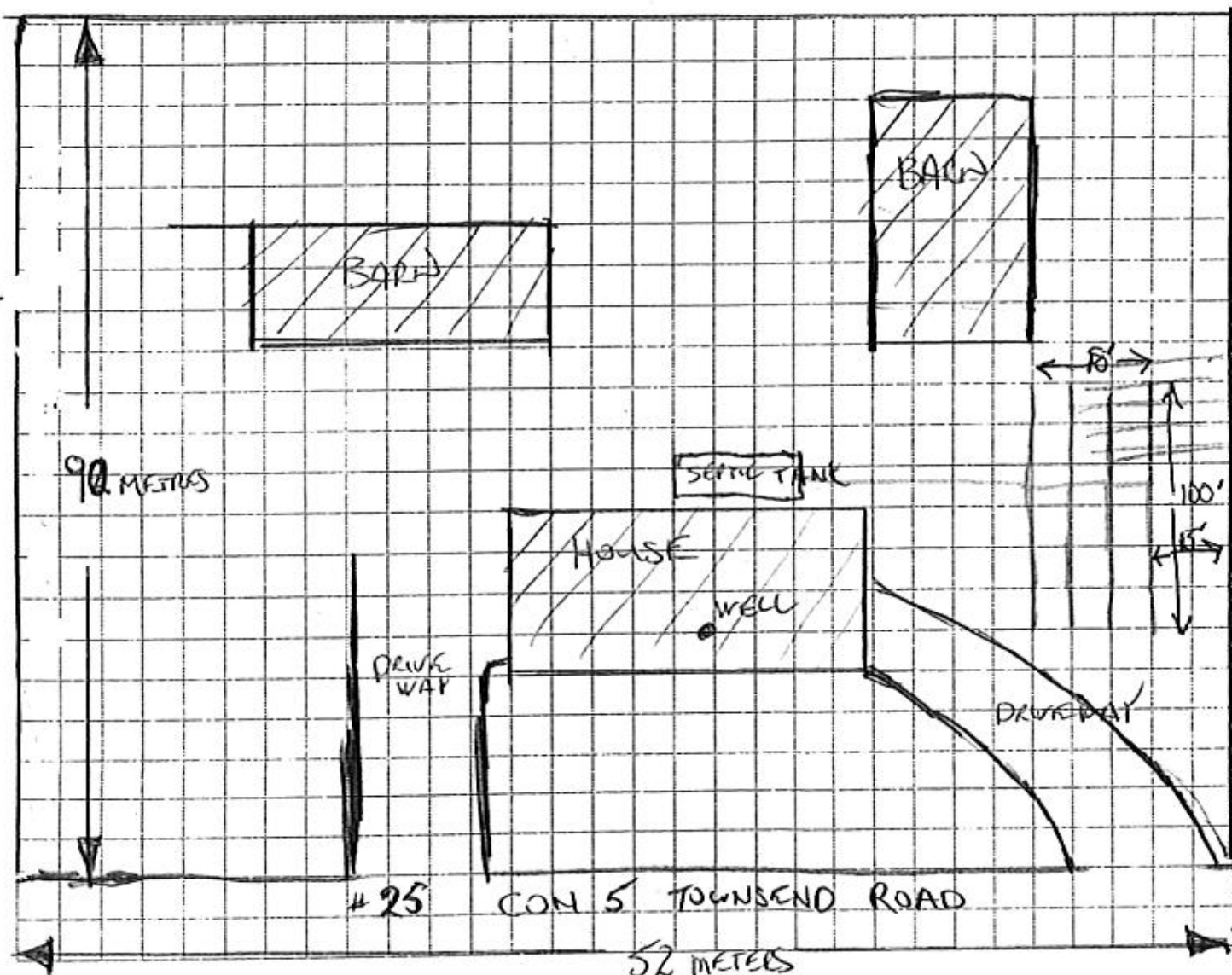
APPLICATION NUMBER: _____

OWNER: KATH KOOPMAN

EVALUATOR: Zen Gilbert

PROPERTY ADDRESS: 25 CONCESSO 5 TOWNSEND

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: KATH KOOPMAN
ZEN GILBERT

NOTE: The above sketch is not to exact scale.