

CONSENT / SEVERANCE

Alisha

File Number BNPL2016061
 Related File Number _____
 Pre-consultation Meeting On various emails
 Application Submitted On MAR 10/16
 Complete Application On MAR 14/16

Application Fee \$1535
 Conservation Authority Fee n/a
 OSSD Form Provided yes
 Sign Issued _____

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- 541010339000

- | | |
|--|---|
| <input type="checkbox"/> Creation of a new lot | <input checked="" type="checkbox"/> Boundary adjustment |
| <input 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 Sharon Jessica Stucz Phone # 469-719-9034
CSABA Stucz
 Address 426 ORANGE HALL Road Fax # _____
 Town / Postal Code RR#6 Tillsonburg N4G 4G9 E-mail _____

¹ If the applicant is a numbered company provide the name of a principal of the company.

AGENT INFORMATION

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

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

Name of Owners ² Steve PITOKKER Phone # 519-842-9298
& LAJOSNE OLAH Fax # _____
 Town / Postal Code TILLSONBURG N4G 4G9 E-mail _____

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:

n/a

RECEIVED

MAR 10 2016

Page 1 of 11



Revised 10.2012

NORFOLK COUNTY
 LANGTON ADMINISTRATION BUILDING

B. LOCATION/LEGAL DESCRIPTION OF SUBJECT LANDS

Geographic Township Middleton Urban Area or Hamlet _____
 Concession Number 2 NORTH OF TALBOT ROAD Lot Number(s) Pl. Lot 1
 Registered Plan Number _____ Lot(s) or Block Number(s) CONCESSION 2 NORTH
 Reference Plan Number PIN 50144-0106 Part Number(s) OF TALBOT ROAD
 Frontage (metres/feet) _____ Depth (metres/feet) TOWNSHIP OF MIDDLETON NORFOLK
 Width (metres/feet) _____ Lot area (m² / ft² or hectares/acres) COUNTY PLAN 37R-10842
 Municipal Civic Address 35 Shorties Side Road, R.R. #6 Main, Tillsonburg,
Ontario N4G 4G9

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):

ADDITION TO EXISTING PROPERTY TO
CORRECT TITLE PROBLEM for residential
 purposes

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

CSABA STUCZ, SHARON JESSICA STUCZ

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

ADDED TO PIN 50144-0140

Roll #3310545-01000200 Csaba Stucz and Sharon Jessica Stucz

CONSENT / SEVERANCE

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:

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						
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER						
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Livestock barn	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of livestock		
Capacity of barn		
Manure storage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of manure storage		

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

Frontage (metres/feet) 68.5m ~~XXXXXXXXXX~~ 68.457m Depth (metres/feet) 30m (+/-) 30.403m
 Width (metres/feet) 61.2m ~~XXXXXX~~ Lot area (m² / ft² or hectares/acres) 930 m
 PROPOSED FINAL LOT SIZE (if boundary adjustment) 930 m²

Existing use: VACANT AGRICULTURAL WITH PART OF
 Proposed use: A house on it.
Residential

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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:

VACANT

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:

VACANT 1 single family residence
XXXXXXXXXXXX plus a proposed addition
as shown on the sketch

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

Frontage (metres/feet) 400m ON Depth (metres/feet) 390m
Width (metres/feet) 3021.5 SIPC ROAD Lot area (m² / ft² or hectares/acres) 16 HECTARS.

Existing use: AGRICULTURAL

Proposed use: AGRICULTURAL

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:

House 9.144m from road; 9.144m x 7.62m
Garage 24.384m from road; 6.096m x 6.096m 4.512m high
Welding shop 50.292m from road; 4.8768m x 9.144m, 4.572m high

Barn 28.956m from road; 21.336m x 12.192m 9.144m high
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:

NONE

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

Frontage (metres/feet) n/a Depth (metres/feet)
Width (metres/feet) Lot area (m² / ft²)

Proposed use:

D. PROPERTY INFORMATION

Present official plan designation(s): AGRICULTURAL

Present zoning: AGRICULTURAL

Is there a site specific zone on the subject lands? NO

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

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

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: _____

Uses of the severed lands: _____

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

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

Date of purchase of subject lands: _____

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:

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

Is the previous use inventory attached?

☐ Yes ☐ No

F. STATUS OF OTHER PLANNING DEVELOPMENT APPLICATIONS

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

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: _____

Land it affects: _____

Purpose: _____

Status/decision: _____

Effect on the requested amendment: _____

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 checked="" type="checkbox"/> No ____ distance
Wooded area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Municipal landfill	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Sewage treatment plant or waste stabilization plant	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Provincially significant wetland (class 1, 2 or 3) or other environmental feature	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Floodplain	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Rehabilitated mine site	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Non-operating mine site within one kilometre	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Active mine site within one kilometre	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Industrial or commercial use (specify the use(s))	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Active railway line	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Seasonal wetness of lands	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Erosion	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance
Abandoned gas wells	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ____ distance

H. SERVICING AND ACCESS

WATER SUPPLY

SEVERED

RETAINED

Municipal piped water

☐
☐

Communal Wells

☐
☐

Individual Wells

☒
☒

Other means (describe) _____

SEWAGE TREATMENT

SEVERED

RETAINED

Municipal Sewers

☐
☐

Communal System

☐
☐

Septic tank and tile bed

☒
☒

Other means (describe) _____

STORM DRAINAGE

SEVERED

RETAINED

Storm Sewers

☐
☐

Open ditches

☒
☒

Other (describe) _____

CONSENT / SEVERANCE

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 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 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.

n / a



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: 4426 Orange Hall Road			
Owner: Csaba Stucz		Lot: 1		Concession: 2 NTR	
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 checked="" type="checkbox"/> Other Boundary Adjustment			
BUILDING INFORMATION		<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural			
Building Area: 110 m²		No. of Bedrooms: 3		No. of Fixture Units: 13	
		Is the building currently occupied? <input checked="" type="radio"/> Yes / No If No, how long?			
EVALUATOR'S INFORMATION		Evaluator's Name: Brian Shepherd		Company Name: George Burnett Ltd	
Address: 303 Main St. Courtland		Postal Code: N0S1E0		Phone: (519) 688-2133	
Email: burnettstld@amtelecom.net		BCIN # 17315			
SITE EVALUATION		Ground Cover (trees, bushes, grass, impermeable surface): Grass, trees		Soil Type: Sand	
Site Slope: <input checked="" type="checkbox"/> Flat <input type="checkbox"/> Moderate <input type="checkbox"/> Steep		Soil Conditions: <input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry		Depth of Water Table: 6 ft.	
Surface Discharge Observed: Yes <input type="radio"/> No <input checked="" type="radio"/>		Odour Detected: Yes <input type="radio"/> No <input checked="" type="radio"/>		Current Weather (at time of evaluation): Overcast	
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:		Size: 800 Gal.		Pump: Yes <input type="radio"/> No <input checked="" type="radio"/>	
<input checked="" type="checkbox"/> Pre-cast <input type="checkbox"/> Plastic <input type="checkbox"/> Fibre Glass <input type="checkbox"/> Wood <input type="checkbox"/> Other _____					
Distribution System:		No. of Tile Runs:		Total Length of Tile:	
Area: <input checked="" type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium		4		200 Ft	
Distance Between Tile Runs:		7 Feet			
Tile Material:		Ends:		Cover:	
<input checked="" type="checkbox"/> PVC <input type="checkbox"/> Clay <input type="checkbox"/> Other _____		<input checked="" type="checkbox"/> Capped <input type="checkbox"/> Joined		<input type="checkbox"/> Filter Cloth <input checked="" type="checkbox"/> Sand <input checked="" type="checkbox"/> Top Soil <input checked="" type="checkbox"/> Seeded	
Setbacks:		Tank		Swimming Pool: 0 Ft Distribution Pipe Shed: 0 Ft House: 21 Ft	
Distance to Buildings & Structures (ft)		6 Feet			
Distance to Bodies of Water (ft)		NA			
Distance to Nearest Well (ft)		Greater than 50 feet		Greater than 50 feet	
Distance to Proposed Property Lines		Front 75' Rear 75' Side 500' Side 150'		Front 75' Rear 23' Side 45' Side 100'	

OVERALL SYSTEM RATING

System is working with no greywater ponding in trenches, header & ends of runs were uncovered for visual inspection.

- ☒ 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:

1. Swimming Pool on top of tile bed
2. Willow trees at end of tile bed
3. Shed on top of tile bed
Recommended to owner to cut trees down & move pool & shed

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, CSABA STOLTZ (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.

CSABA STOLTZ
Owner Signature

2016 Feb 03
Date

EVALUATOR:

1. I, Brian Shepherd 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.

Brian Shepherd
Evaluator Signature

February 3, 2016
Date

BUILDING DIVISION COMMENTS

Comments: _____

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

Chief Building Official or designate

Date

Revised: March 24, 2011



On Site Sewage Disposal System Location Plan

DATE: February 3, 2016

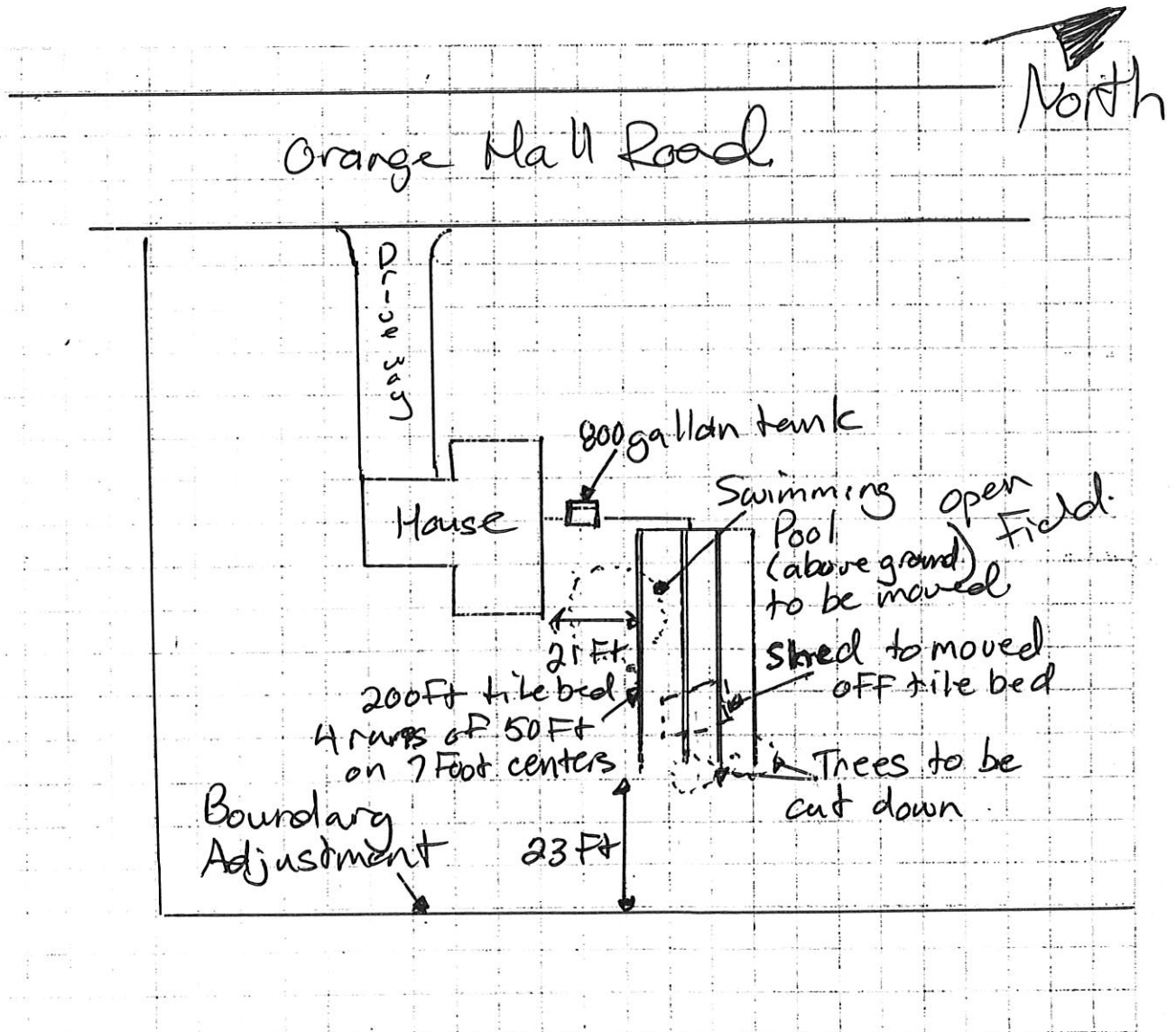
APPLICATION NUMBER: _____

OWNER: Csaba Stucz

EVALUATOR: Brian Shepherd

PROPERTY ADDRESS: #426 Orange Hall Road

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.



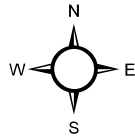
PREPARED BY: Brian Shepherd

NOTE: The above sketch is not to exact scale.

MAP 1

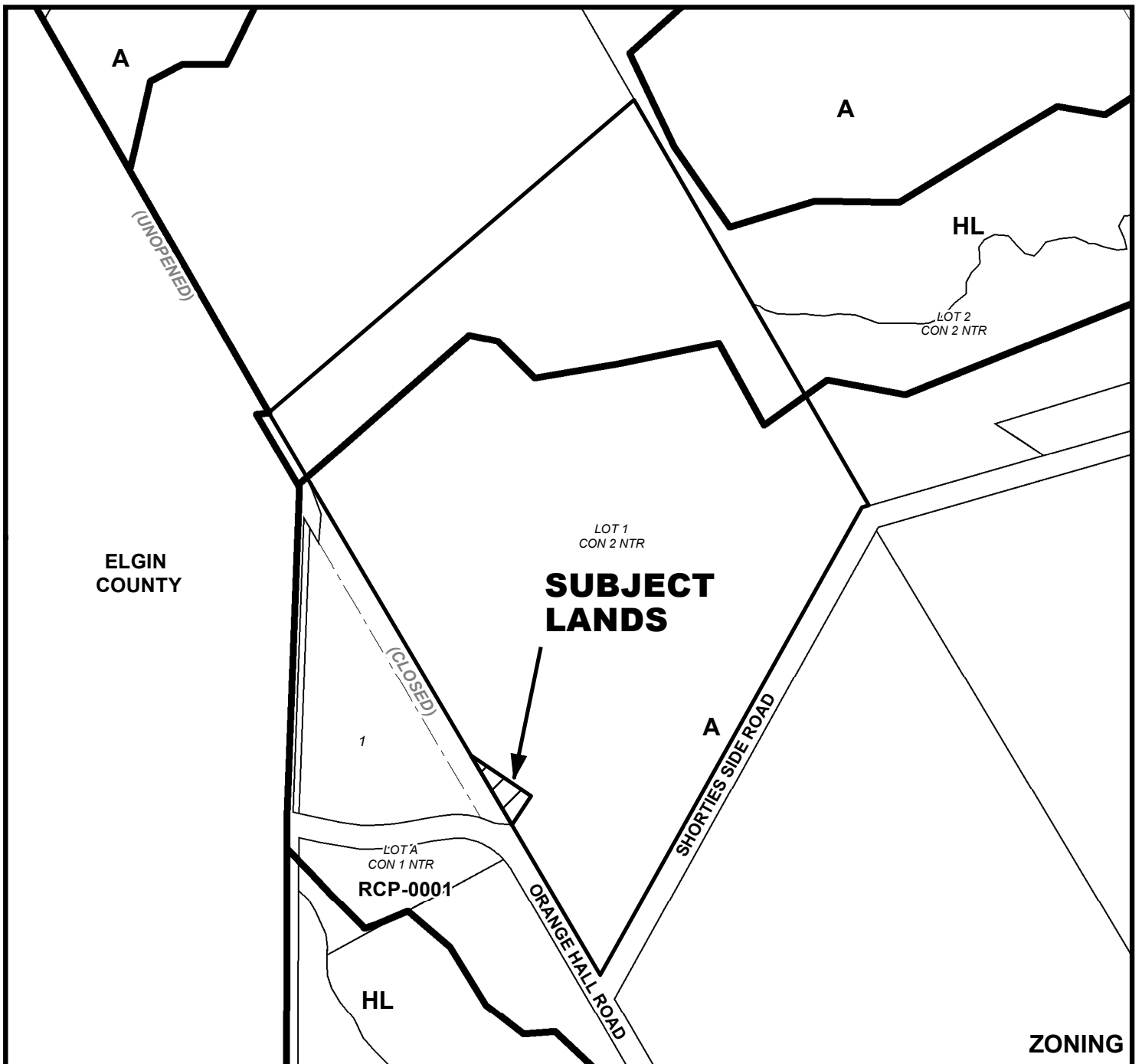
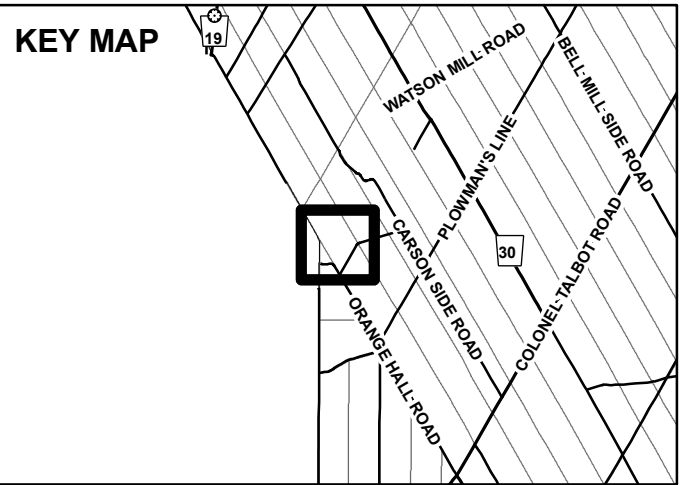
File Number: BNPL2016061

Geographic Township of
MIDDLETON



1:5,000

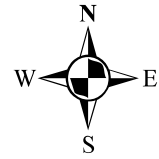
40 20 0 40 80 120 160
Meters



MAP 2

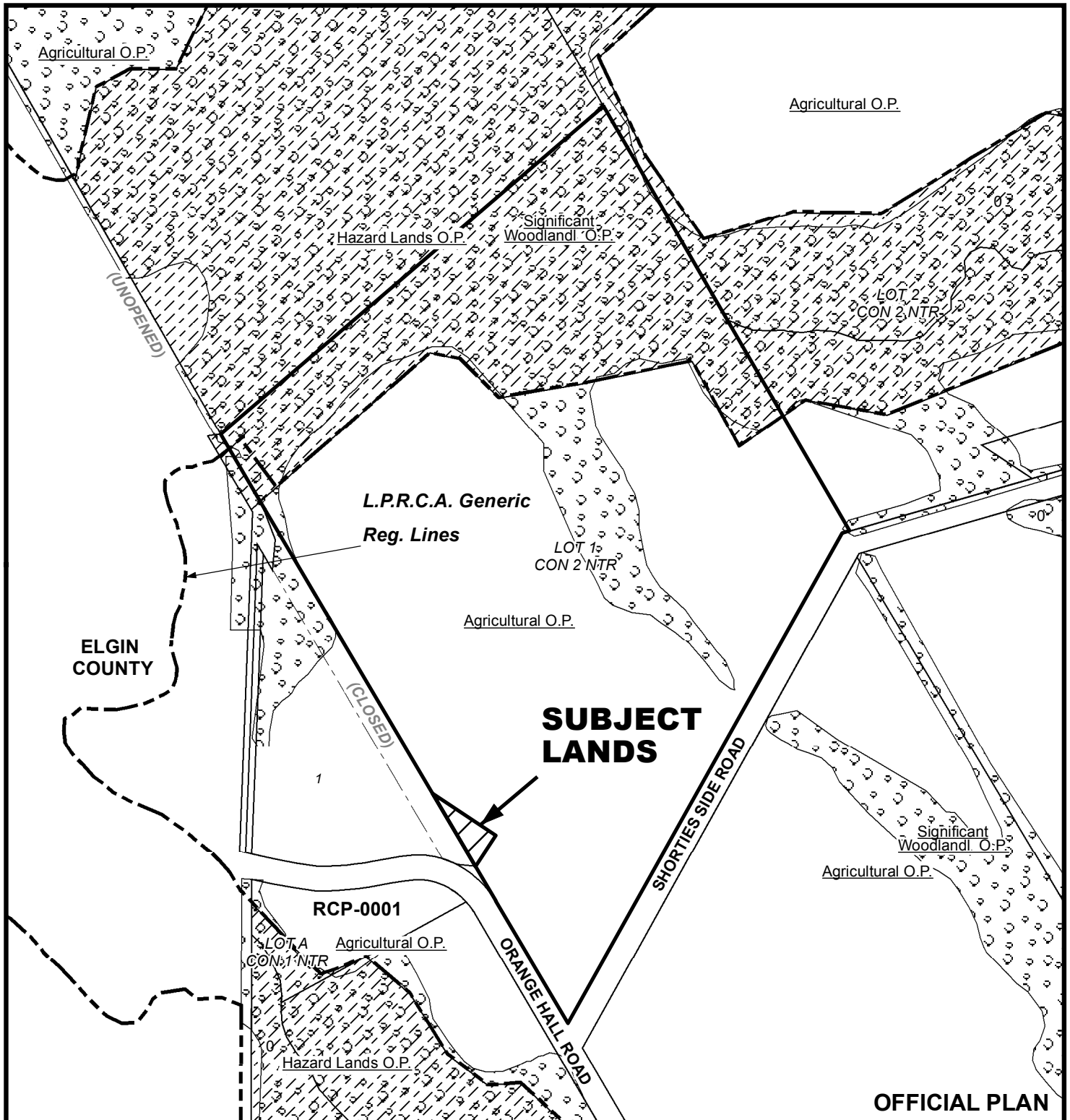
File Number: BNPL2016061

Geographic Township of MIDDLETON



1050 10203040
Meters

1:4,500



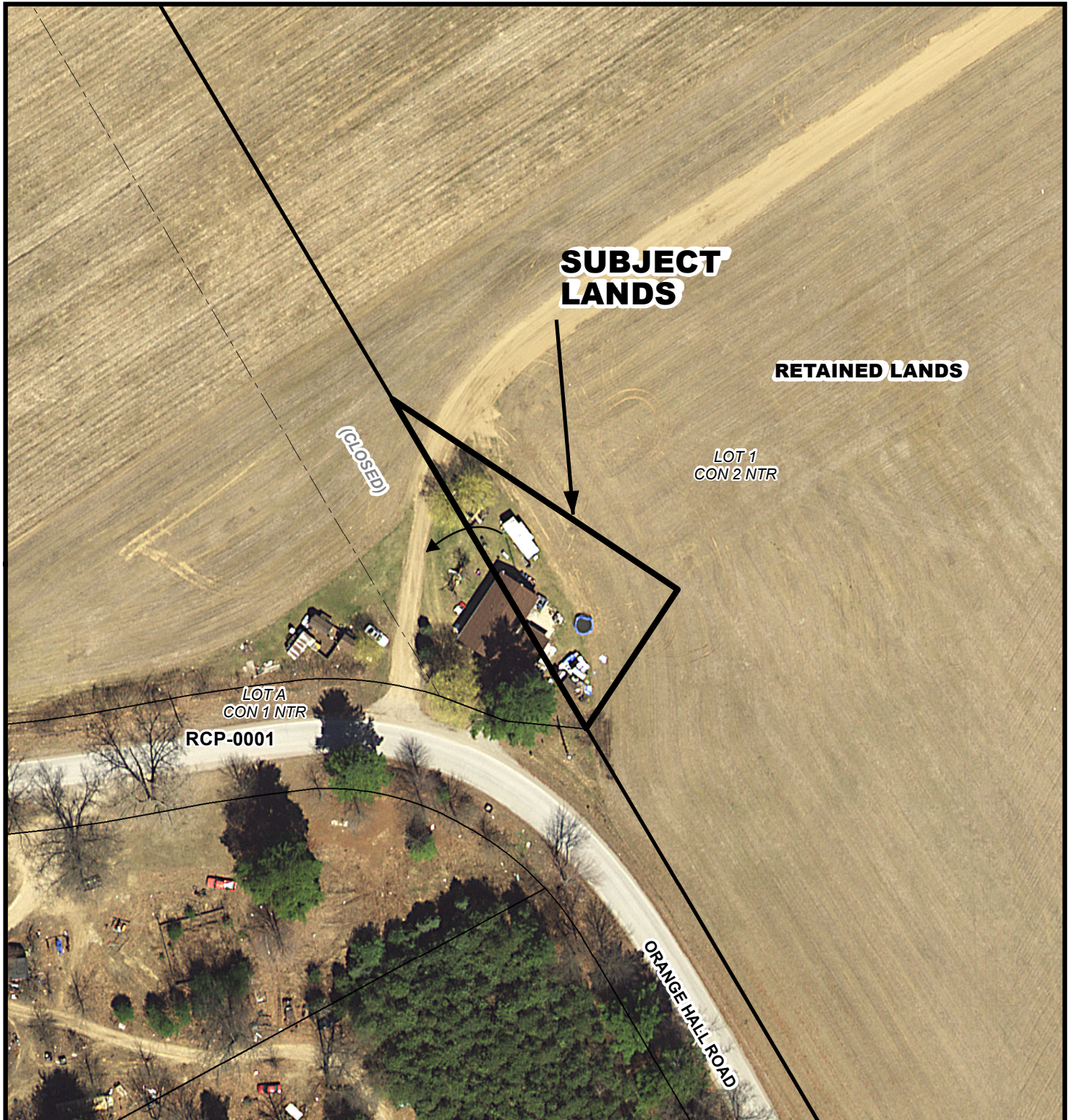
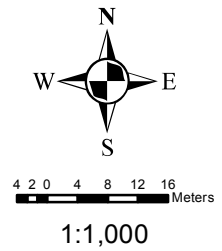
OFFICIAL PLAN

13/04/2016

MAP 3

File Number: BNPL2016061

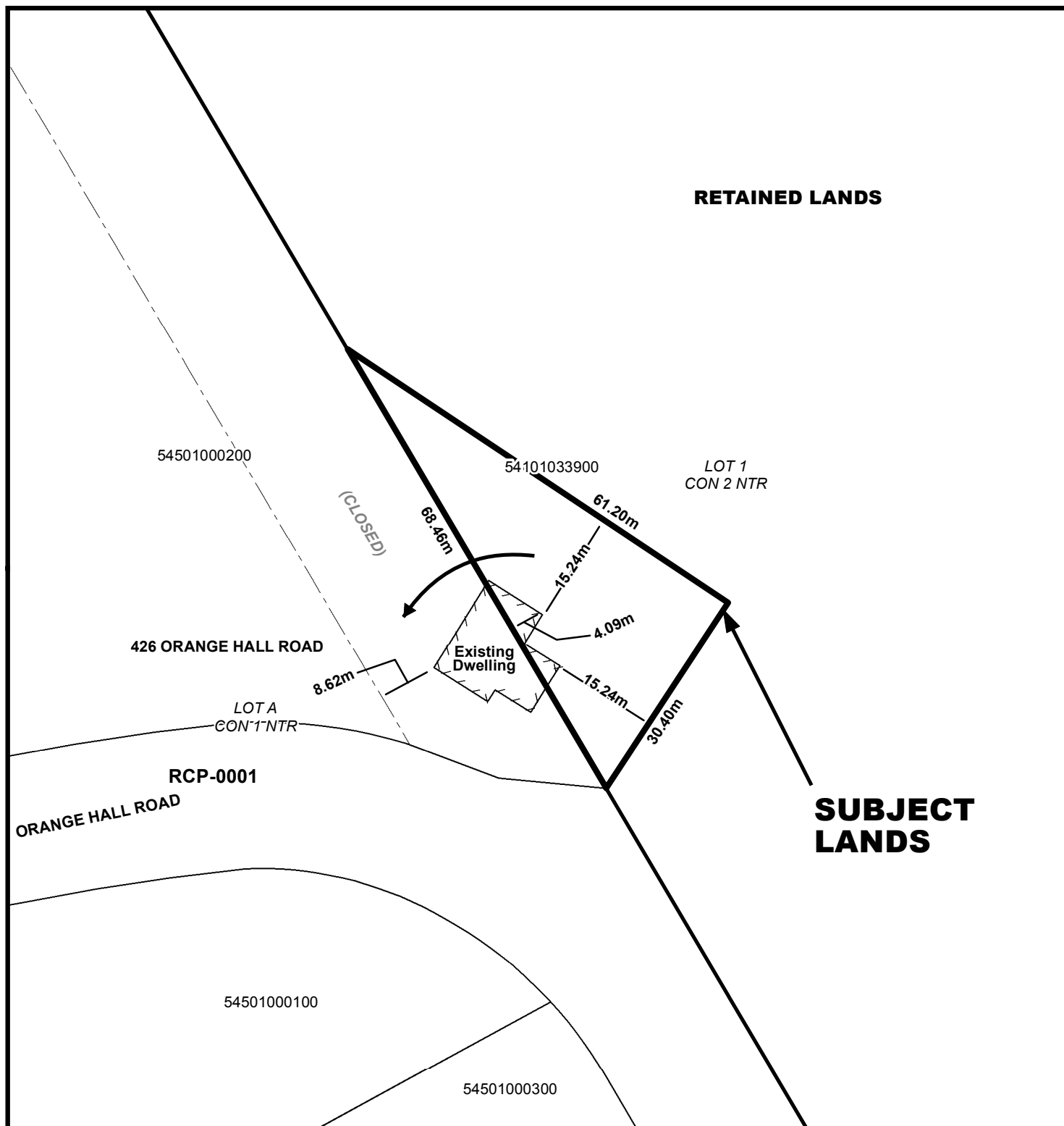
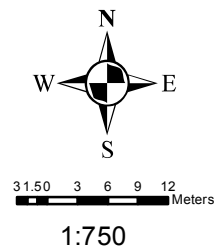
Geographic Township of MIDDLETON



MAP 4

File Number: BNPL2016061

Geographic Township of MIDDLETON



LOCATION OF LANDS AFFECTED

File Number: BNPL2016061

Geographic Township of MIDDLETON

