

**CONSENT / SEVERANCE**

File Number BNPL20 17162 Application Fee 1842.<sup>00</sup>  
 Related File Number \_\_\_\_\_ Conservation Authority Fee \_\_\_\_\_  
 Pre-consultation Meeting On June 2017 OSSD Form Provided \_\_\_\_\_  
 Application Submitted On July 7 2017 Sign Issued \_\_\_\_\_  
 Complete Application On July 7 2017

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- 542-020 -39700**

- |  |   |
|--|---|
| <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 <sup>1</sup> JEFF HILL Phone # 519-550-3255  
 Address 1540 12<sup>TH</sup> CON. Fax # \_\_\_\_\_  
 Town / Postal Code LANGTON ON NOE LGO E-mail \_\_\_\_\_

<sup>1</sup> If the applicant is a numbered company provide the name of a principal of the company.

**AGENT INFORMATION**

Name of Agent JASON JUHASZ Phone # 226-231-0418  
 Address 760 11<sup>TH</sup> CON. Fax # \_\_\_\_\_  
 Town / Postal Code LANGTON ON NOE LGO E-mail jjuhaszconsulting@hotmail.ca

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

Name of Owners <sup>2</sup> ERIK DEKEYSER Phone # 519-875-2295  
 Address 1564 12<sup>TH</sup> CON. Fax # \_\_\_\_\_  
 Town / Postal Code LANGTON ON NOE LGO E-mail \_\_\_\_\_

<sup>2</sup> 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 <sup>3</sup>: ☒ Applicant ☒ Agent ☒ Owner

<sup>3</sup> 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>N WAL</u>	Urban Area or Hamlet	
Concession Number	<u>CON 11</u>	Lot Number(s)	<u>PT. LOT 20</u>
Registered Plan Number		Lot(s) or Block Number(s)	
Reference Plan Number		Part Number(s)	
Frontage (metres/feet)	<u>570m 1870 ft</u>	Depth (metres/feet)	<u>920m 3,018 ft</u>
Width (metres/feet)	<u>570m 1870 ft</u>	Lot area (m <sup>2</sup> / ft <sup>2</sup> or hectares/acres)	<u>44.11 ha 109 AC</u>
Municipal Civic Address	<u>1564 12TH CON.</u>		

For questions regarding requirements for a municipal civic address please contact [NorfolkGIS@norfolkcounty.ca](mailto: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):

ADJUST BOUNDARY LINES TO TRANSFER OWNERSHIP OF CEDAR TREES  
+ BRING PROPERTY SIZE CLOSER TO 1 AC.

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

JEFF HILL

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

JEFF HILL 3310 542 020 39740

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	
					<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 <sup>2</sup> / ft <sup>2</sup> or hectares/acres)	(m <sup>2</sup> / ft <sup>2</sup> or hectares/acres)
Woodlot area	(m <sup>2</sup> / ft <sup>2</sup> or hectares/acres)	(m <sup>2</sup> / ft <sup>2</sup> 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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Livestock barn	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input 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 type="checkbox"/> No
Type of manure storage		

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

Frontage (metres/feet) 7.01 m 23 ft Depth (metres/feet) 55.169 m 181 ft  
 Width (metres/feet) 45.11 m 148 ft Lot area (m<sup>2</sup> / ft<sup>2</sup> or hectares/acres) 3 98.4 m<sup>2</sup> 4,288.34 ft<sup>2</sup>  
 PROPOSED FINAL LOT SIZE (if boundary adjustment) 2,488.68 m<sup>2</sup> 26,788 ft<sup>2</sup>

Existing use: RURAL RESIDENTIAL

Proposed use: RURAL RESIDENTIAL





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:

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:

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

Frontage (metres/feet)	<u>563 m 1847 ft</u>	Depth (metres/feet)	<u>920 m 3018 ft</u>
Width (metres/feet)	<u>"</u>	Lot area (m <sup>2</sup> / ft <sup>2</sup> or hectares/acres)	<u>108.9 ac 44.07 ha</u>
Existing use:	<u>AGRICULTURAL</u>		
Proposed use:	<u>AGRICULTURAL</u>		

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:

AS EXISTING

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:

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

Frontage (metres/feet)	<u>\$</u>	Depth (metres/feet)	<u></u>
Width (metres/feet)	<u></u>	Lot area (m <sup>2</sup> / ft <sup>2</sup> )	<u></u>
Proposed use: <u></u>			

#### 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: N/A

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:

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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:

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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:

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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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <u>100</u> 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:

☐ Unopened road

☒ Municipal road maintained all year

☐ Municipal road maintained seasonally

☐ Provincial highway

☐ Right-of-way

☐ Other (describe below)

If other, describe: \_\_\_\_\_

Name of road/street: \_\_\_\_\_

12<sup>TH</sup> CON.

Existing or proposed access to **SEVERED** lands:

☐ Unopened road

☒ Municipal road maintained all year

☐ Municipal road maintained seasonally

☐ Provincial highway

☐ Right-of-way

☐ Other (describe below)

If other, describe: \_\_\_\_\_

Name of road/street: \_\_\_\_\_

12<sup>TH</sup> CON.

## 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.

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### K. NOTIFICATION SIGN REQUIREMENTS

For the purpose of public notification and in order for staff to locate your lands, you will be given a sign to indicate the intent and purpose of your development application. It is your responsibility to:

1. Post one sign per frontage in a conspicuous location on the subject lands
2. Ensure one sign is posted at the front of the subject lands at least three feet above ground level
3. Notify the Planner when the sign is in place in order to avoid processing delays
4. Maintain the sign until the development application is finalized and thereafter removed

### L. PERMISSION TO ENTER SUBJECT LANDS

Permission is hereby granted to Norfolk County staff and to members of the Committee of Adjustment to enter the premises subject to this development application for the purposes of making inspections associated with this application, during normal and reasonable working hours.

X   
Owner/Applicant/Agent Signature

March 9/2016  
Date

### M. 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 development application.

X   
Owner/Applicant/Agent Signature

March 9/2016  
Date

# **N. DECLARATION**

I, JASON JUHASZ 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:**

In Langton Owner/Applicant/Agent Signature

This 7th day of July A.D., 20 17

A Commissioner, etc.

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

# **O. OWNER'S AUTHORIZATION**

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

I/We ERIK DEKEYSER am/are the registered owner(s) of the lands that is the subject of this  
development application for consent / severance and I/We authorize JASON JUHASZ to  
make this development application on my/our behalf and to provide any of my/our personal information  
necessary for the processing of this development application. Moreover, this shall be your good and sufficient  
authorization for so doing.

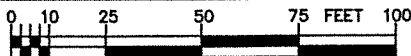
x Erik Dekeyser  
Owner

Barbara Dekeyser  
Owner

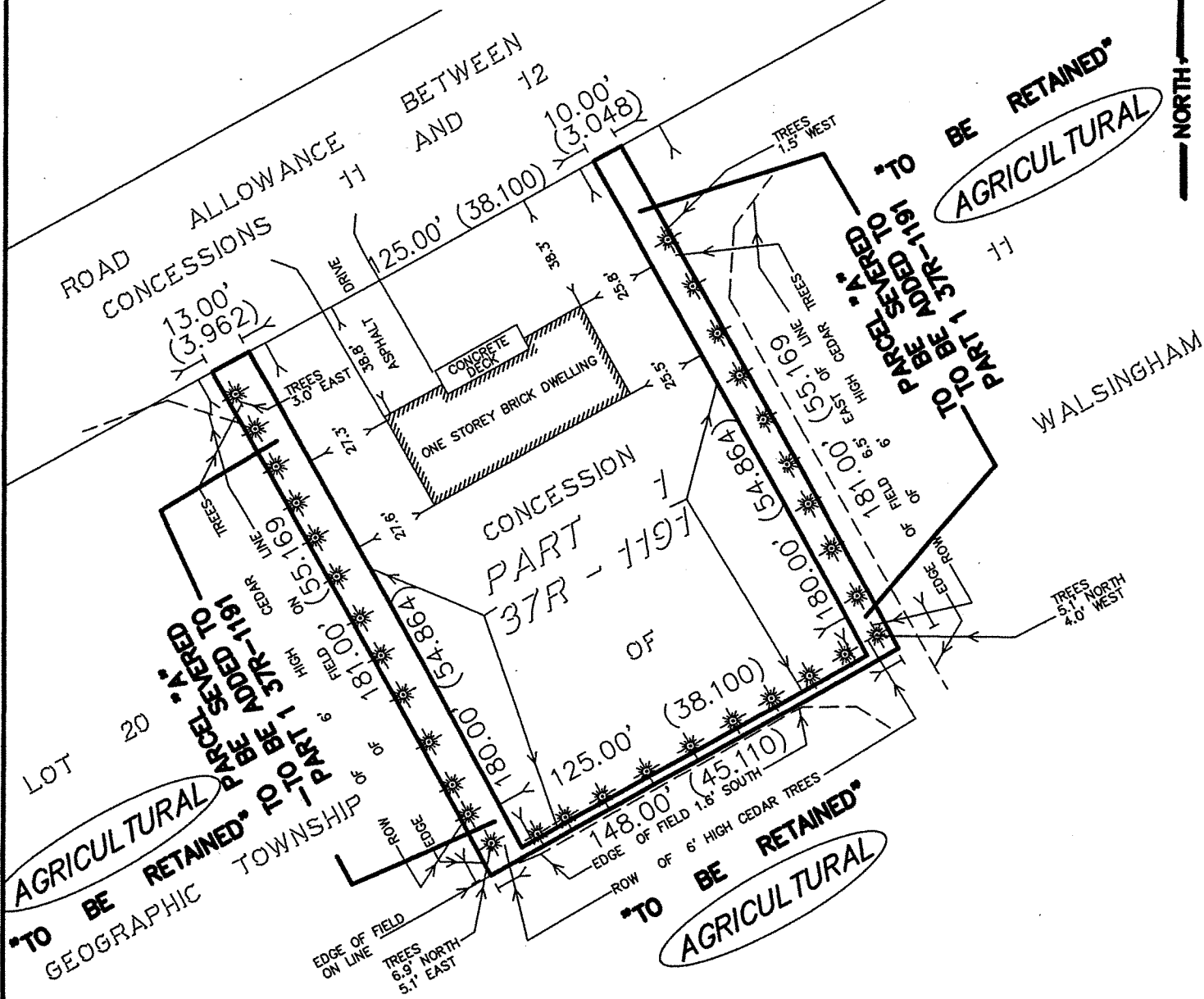
March 9/2016  
Date

March 9/2016  
Date

SCALE - 1 INCH = 50 FEET



**IMPERIAL** DISTANCES SHOWN ON THIS PLAN ARE IN IMPERIAL UNITS AND CAN BE CONVERTED TO METRES BY MULTIPLYING BY 0.3048



SKETCH FOR PROPOSED SEVERANCE

PART OF LOT 20

CONCESSION 11

GEOGRAPHIC TOWNSHIP OF NORTH WALSINGHAM

COUNTY OF NORFOLK

AREA OF PARCEL "A"

TO BE SEVERED =

= 0.098 ACRES

= 398.4 SQUARE METRES

**KIM HUSTED SURVEYING LTD.**  
ONTARIO LAND SURVEYOR

30 HARVEY STREET, TILLSONBURG ONTARIO, N4G 3J8  
PHONE: 519-842-3638 FAX: 519-842-3639

PROJECT: 15-11840

REFERENCE: FF8 DISK No.

DWG.

CKD.



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:	
<b>PROPERTY INFORMATION</b>		Municipal Address: <u>1540 12<sup>TH</sup> CONC NORTH WALSHINGHAM</u>			
Owner: <u>JEFF HILL</u>		Lot: <u>Pt LOT 20</u>		Concession: <u>11</u>	
Lot Area: <u>.52A</u>	Lot Frontage: <u>125 Feet</u>	Assessment Roll No. <u>54202039740</u>			
<b>PURPOSE OF EVALUATION</b>		<input type="checkbox"/> Consent <input checked="" type="checkbox"/> Minor Variance <input type="checkbox"/> Site Plan <input type="checkbox"/> Zoning <input type="checkbox"/> Other _____			
<b>BUILDING INFORMATION</b>		<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural			
Building Area:		No. of Bedrooms: <u>3</u>	No. of Fixture Units: <u>15</u>	Is the building currently occupied? <u>Yes</u> / No If No, how long?	
<b>EVALUATOR'S INFORMATION</b>		Evaluator's Name: <u>SCOTT DARLINGTON</u>		Company Name: <u>DARLINGTON WIRING + PBC LTD.</u>	
Address: <u>1425 Norfolk</u>		Postal Code: <u>N4B 2W4</u>		Phone: <u>ONT.</u>	
Email: <u>scott@darlingtonwp.com</u>		BCIN # <u>15833</u>			
<b>SITE EVALUATION</b>		Ground Cover (trees, bushes, grass, impermeable surface): <u>LAWN</u>		Soil Type: <u>SAND</u>	
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: <u>45</u> ft.	
Surface Discharge Observed: Yes <u>No</u>		Odour Detected: Yes <u>No</u>		Current Weather (at time of evaluation): <u>Cloudy 12°C</u>	
<b>SYSTEM EVALUATION</b>		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 <u>No</u>	
Distribution System: <input checked="" type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium		No. of Tile Runs: <u>6</u>	Total Length of Tile: <u>300'</u>	Distance Between Tile Runs: <u>6'</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 checked="" type="checkbox"/> Top Soil <input type="checkbox"/> Seeded	
<b>Setbacks:</b>		<b>Tank</b>		<b>Distribution Pipe</b>	
Distance to Buildings & Structures (ft)		<u>7'</u>		<u>25'</u>	
Distance to Bodies of Water (ft)		<u>N/A</u>		<u>N/A</u>	
Distance to Nearest Well (ft)		<u>55'</u>		<u>85'</u>	
Distance to Proposed Property Lines		Front <u>70'</u> Rear <u>80'</u> Side <u>80'</u> Side <u>30'</u>		Front <u>80'</u> Rear <u>30'</u> Side <u>55'</u> Side <u>20'</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:

**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, Jeff Hill (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.

[Signature]  
Owner Signature

FEB 17/17.  
Date

**EVALUATOR:**

1. I, SCOTT DARLINGTON 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.

[Signature]  
Evaluator Signature

~~17~~ FEB 17 / 2017  
Date

**BUILDING DIVISION COMMENTS**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ have reviewed the information contained in this form as submitted.

Chief Building Official or designate \_\_\_\_\_

\_\_\_\_\_  
Date



## On Site Sewage Disposal System Location Plan

DATE: FEB 17 / 2017

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

OWNER: JEFF HICK

EVALUATOR: SCOTT DARLINGTON

PROPERTY ADDRESS: 1540, 12<sup>TH</sup> CONC N. WALSINGHAM

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: SCOTT DARLINGTON

NOTE: The above sketch is not to exact scale.



A horizontal graphic scale bar with markings at 0, 10, 25, 50, 75, and 100 feet. The bar is divided into alternating black and white segments. The word "FEET" is printed between the 75 and 100 marks.

[illegible]

**= 0.098 ACRES**  
**- 398.4 SQUARE METRES**

**KIM HUSTED SURVEYING LTD.**  
**ONTARIO LAND SURVEYOR**  
 30 HARVEY STREET, TILSONBURG ONTARIO, N4G 3J8  
 PHONE: 519-842-3638 FAX: 519-842-3639



## 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: 1540 12th Concession Rd, Langton

Legal Description: NWAL CON 11 PT LOT 20 RP37R1191 PART 1 REG  
0.52AC 125.00FR 180.00D

Roll Number: 331054202039740

Application #:

Information Origins: Development Services GIS/Survey provided by owner

#### Accessory Structure

3.2.1 a) building height	6.00	5.09	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	1.20	3.05	N/A	m
e) minimum rear yard	1.20	9.14	N/A	m
f) through lot distance to street line	6.00		N/A	m
g) Lot coverage (Note: Proposed Area)		222.97		
i) lot coverage	10.00	10.59	0.59	%
ii) usable floor area	100.00	222.97	122.97	m.sq

#### 3.36 Surplus Farm Dwelling Severance

200.00 N/A m.sq

b) existing accessory buildings/structures

Comments

1) Proposed accessory structure exceeds maximum lot coverage - deficient 0.59% 2) Proposed accessory structure exceeds maximum usable floor area - deficient 122.97 m.sq

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

date

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

Signature of Zoning Administrator

date

**RECEIVED**

JUL 13 2017

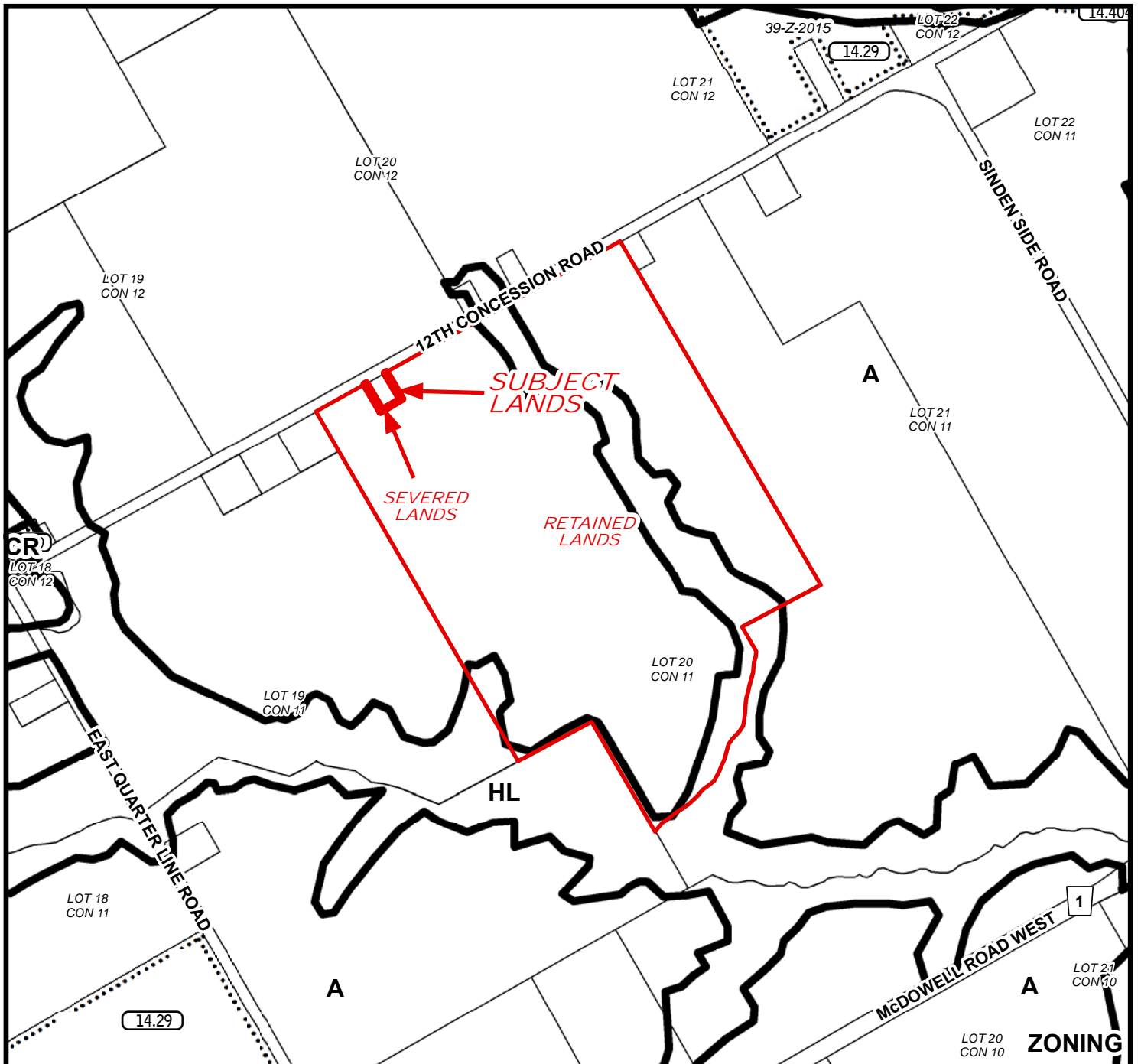
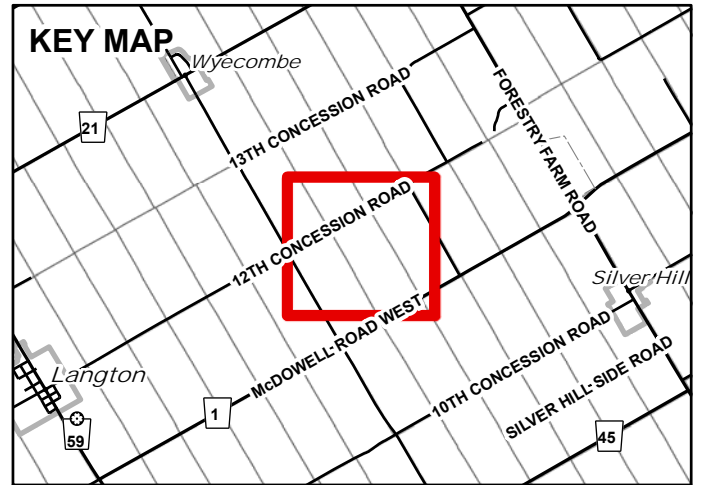
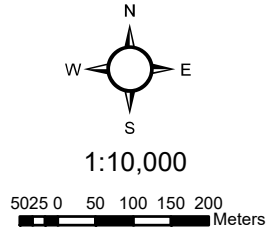
NORFOLK COUNTY  
LANGTON ADMINISTRATION BUILDING

# MAP 1

File Number: BNPL2017162

Geographic Township of

**NORTH WALSLINGHAM**



# MAP 2

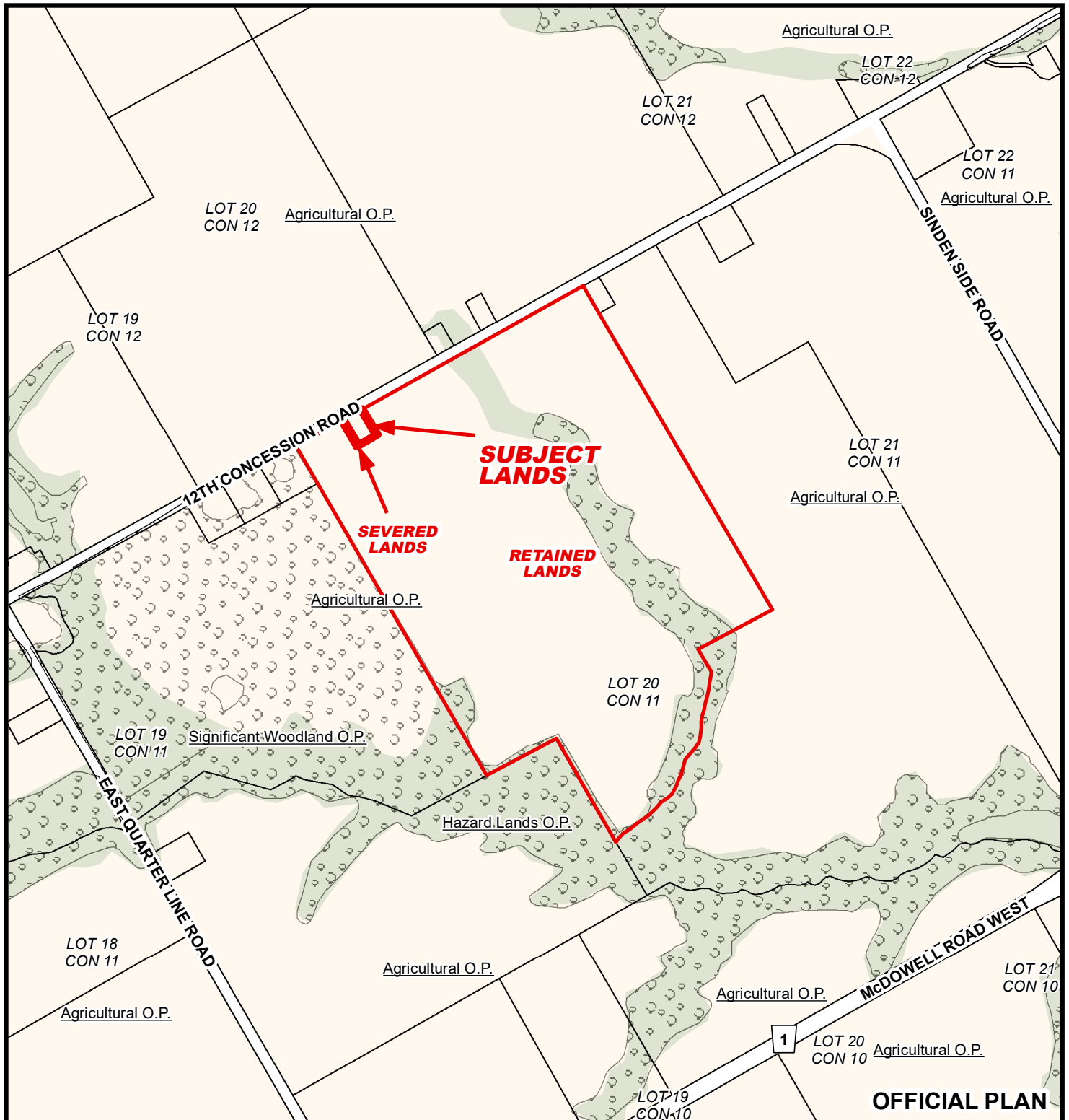
File Number: BNPL2017162

Geographic Township of NORTH WALSHINGHAM



50 25 0 50 100 150 200 Meters

1:10,000

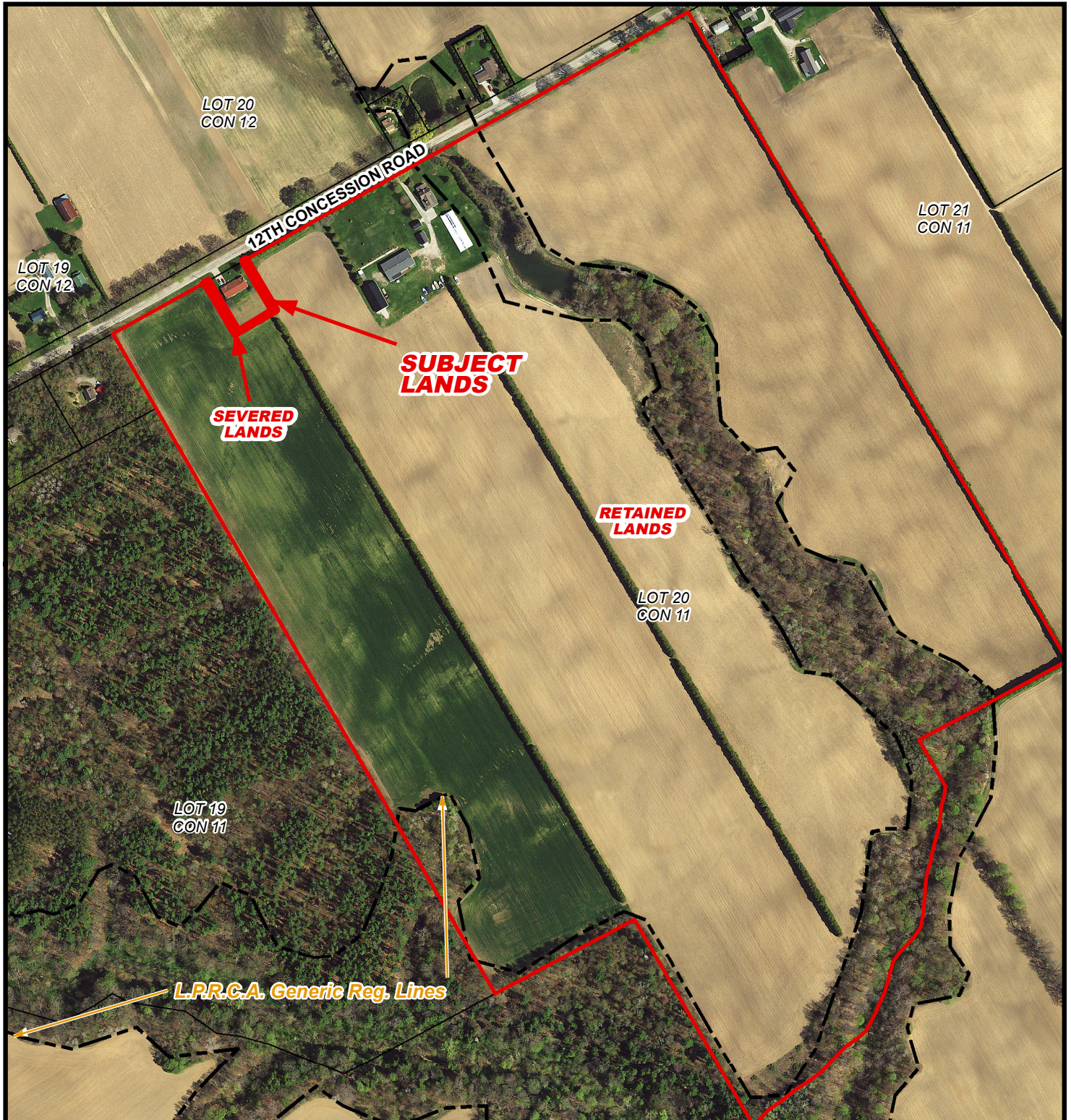
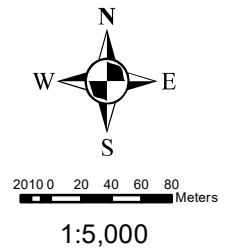




# MAP 3

File Number: BNPL2017162

Geographic Township of NORTH WALSINGHAM

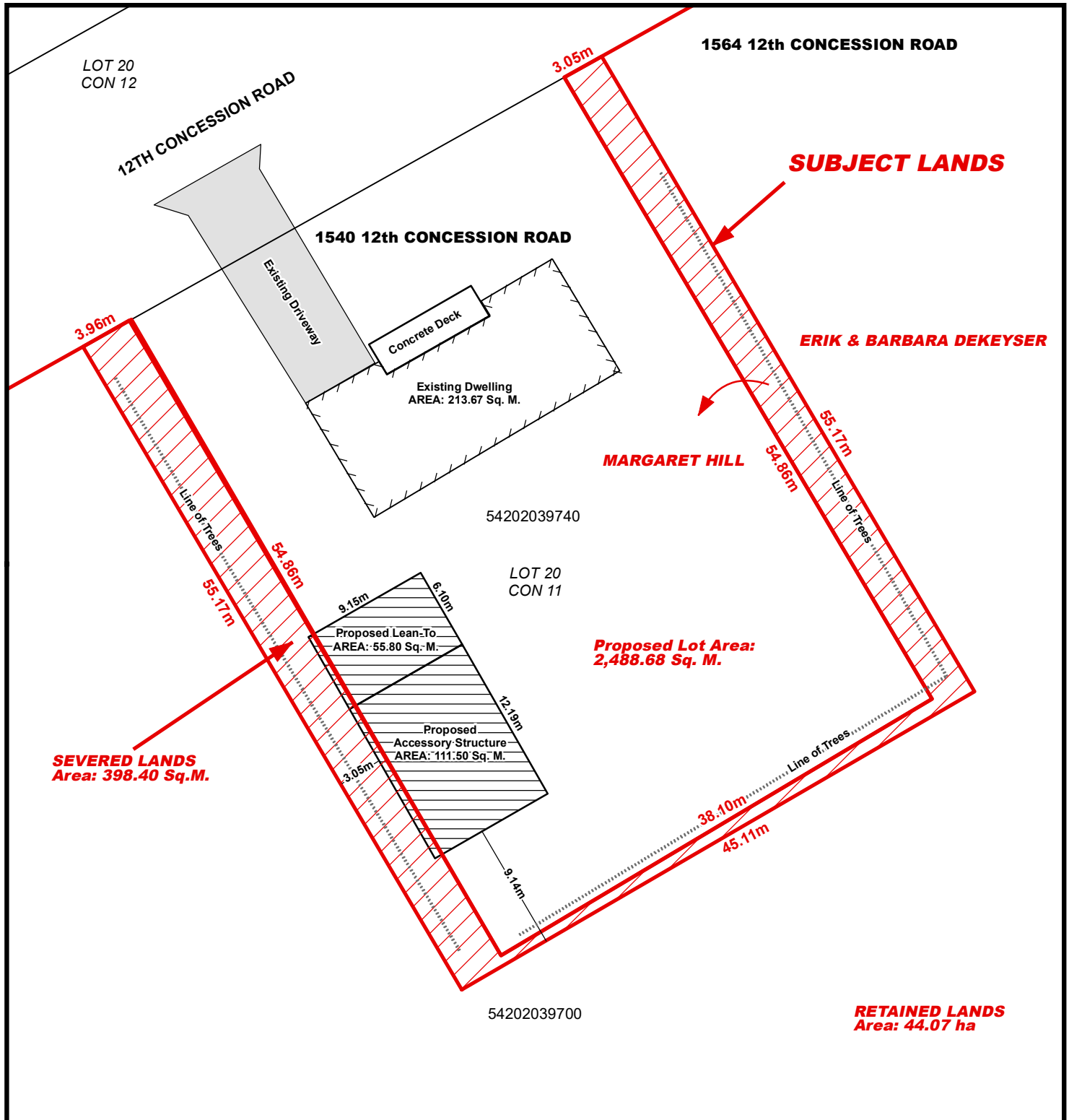
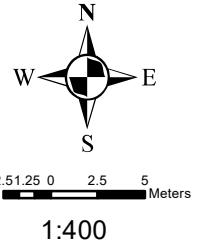




# MAP 4

File Number: BNPL2017162

Geographic Township of NORTH WALSINGHAM





# LOCATION OF LANDS AFFECTED

File Number: BNPL2017162

Geographic Township of NORTH WALSLINGHAM

