

**For Office Use Only:**

File Number	<u>BNPL2018297</u>	Application Fee	<u>\$2210</u>
Related File Number	<u>—</u>	Conservation Authority Fee	<u>—</u>
Pre-consultation Meeting	<u>—</u>	OSSD Form Provided	<u>Yes x2</u>
Application Submitted	<u>Nov 23/18</u>	Planner	<u>Steve</u>
Complete Application	<u>Nov 23/18</u>	Public Notice Sign	<u>Yes</u>

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

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

**Property Assessment Roll Number:** 543010043000000**A. Applicant Information****Name of Owner** Larry and Patricia Ayres

It is the responsibility of the owner or applicant to notify the planner of any changes in ownership within 30 days of such a change.

Address 1272 Norfolk County Road 23

Town and Postal Code Walsingham, ON N0E 1X0

Phone Number 519-875-2847

Cell Number \_\_\_\_\_

Email \_\_\_\_\_

**Name of Applicant** same as owner

Address \_\_\_\_\_

Town and Postal Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Cell Number \_\_\_\_\_

Email \_\_\_\_\_



<b>Name of Agent</b>	David Roe, Civic Planning Solutions Inc.
Address	599 Larch Street
Town and Postal Code	Delhi, ON N4B 3A7
Phone Number	519-582-1174
Cell Number	519-983-8154
Email	dfrfez@bellnet.ca

Please specify to whom all communications should be sent. Unless otherwise directed, all correspondence, notices, etc., in respect of this application will be forwarded to the agent noted above.

☐ Owner
 ☐ Agent
 ☒ Applicant

Names and addresses of any holder of any mortgagees, charges or other encumbrances on the subject lands:

## B. Location, Legal Description and Property Information

- Legal Description (include Geographic Township, Concession Number, Lot Number, Block Number and Urban Area or Hamlet):

South Walsingham - Concession 6, Part Lot 1

Municipal Civic Address: 1272 Norfolk County Road 23

Present Official Plan Designation(s): Agricultural and Hazard Land

Present Zoning: A and HL

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

☐ Yes
 ☒ No
 If yes, please specify:

- Present use of the subject lands:

Agricultural - cash crop corn and beans

4. Please describe **all existing** buildings or structures on the subject lands and whether they are to be retained, demolished or removed. If retaining the buildings or structures, please describe the type of buildings or structures, and illustrate the setback, in metric units, from front, rear and side lot lines, ground floor area, gross floor area, lot coverage, number of storeys, width, length, height, etc. on your attached sketch which must be included with your application:

~~2<sup>nd</sup> houses, pack barn, implement shed, 2 smaller sheds.~~

5. If an addition to an existing building is being proposed, please explain what will it be used for (e.g. bedroom, kitchen, bathroom, etc.). If new fixtures are proposed, please describe.

n/a

6. Please describe **all proposed** buildings or structures/additions on the subject lands. Describe the type of buildings or structures/additions, and illustrate the setback, in metric units, from front, rear and side lot lines, ground floor area, gross floor area, lot coverage, number of storeys, width, length, height, etc. on your attached sketch which must be included with your application:

7. Are any existing buildings on the subject lands designated under the *Ontario Heritage Act* as being architecturally and/or historically significant? Yes ☐ No ☒

If yes, identify and provide details of the building:

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

house built in 1993.

9. Existing use of abutting properties:

Agricultural and residential

10. Are there any easements or restrictive covenants affecting the subject lands?

☐ Yes ☒ No If yes, describe the easement or restrictive covenant and its effect:

\_\_\_\_\_

### C. Purpose of Development Application

Note: Please complete all that apply.

#### 1. Site Information

#### Existing

#### Proposed

Please indicate unit of measurement, i.e. m, m<sup>2</sup> or %, etc.

Lot frontage	65m + 485m	
Lot depth	629m	
Lot width	688m	
Lot area	98.49	
Lot coverage		
Front yard		
Rear yard		
Left Interior side yard		
Right Interior side yard		
Exterior side yard (corner lot)		

2. Please outline the relief requested (assistance is available):

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

4. Description of land intended to be severed in metric units:

Frontage:	80m
Depth:	60.5m
Width:	80m
Lot Area:	4840m <sup>2</sup> (1.19ac)
Present Use:	Agricultural
Proposed Use:	Residential
Proposed final lot size (if boundary adjustment):	

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

Description of land intended to be retained in metric units:

Frontage: 65m + 405m  
Depth: 629m  
Width: 688m  
Lot Area: 97.5 acres  
Present Use: Agricultural  
Proposed Use: Agricultural

5. Description of proposed right-of-way/easement in metric units:

Frontage: \_\_\_\_\_  
Depth: \_\_\_\_\_  
Width: \_\_\_\_\_  
Area: \_\_\_\_\_  
Proposed use: \_\_\_\_\_

6. List all properties in Norfolk County, which are owned and farmed by the applicant and involved in the farm operation:

Owners Name: Larry and Patricia Ayres  
Roll Number: 543010 04300 0000  
Total Acreage: 98.5 acres  
Workable Acreage: 70 acres  
Existing Farm Type: (i.e., corn, orchard etc) corn and beans  
Dwelling Present?: ☒ Yes ☐ No If yes, year dwelling built \_\_\_\_\_

Owners Name: Larry Ayres  
Roll Number: 543 010 04200 0000  
Total Acreage: 48.22 acres



Workable Acreage: 45 acres \_\_\_\_\_

Existing Farm Type: (i.e., corn, orchard etc) corn and beans \_\_\_\_\_

Dwelling Present?: ☐ Yes ☒ No If yes, year dwelling built \_\_\_\_\_

Owners Name: \_\_\_\_\_

Roll Number: \_\_\_\_\_

Total Acreage: \_\_\_\_\_

Workable Acreage: \_\_\_\_\_

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

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

Owners Name: \_\_\_\_\_

Roll Number: \_\_\_\_\_

Total Acreage: \_\_\_\_\_

Workable Acreage: \_\_\_\_\_

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

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

**Note: If additional space is needed please attach a separate sheet.**

#### **D. Previous Use of the Property**

1. Has there been an industrial or commercial use on the subject lands or adjacent lands? ☐ Yes ☒ No ☐ Unknown

If yes, specify the uses (example: gas station, petroleum storage, etc.):

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

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

4. If you answered yes to any of the above questions in Section D, a previous use inventory showing all known former uses of the subject lands, or if appropriate, the adjacent lands, is needed. Is the previous use inventory attached? ☐ Yes ☒ No



### E. Provincial Policy

1. Is the requested amendment consistent with the provincial policy statements issued under subsection 3(1) of the *Planning Act, R.S.O. 1990, c. P. 13*? ☒ Yes ☐ No

If no, please explain:

No change in land use proposed

2. It is owner's responsibility to be aware of and comply with all relevant federal or provincial legislation, municipal by-laws or other agency approvals, including the Endangered Species Act, 2007. Have the subject lands been screened to ensure that development or site alteration will not have any impact on the habitat for endangered or threatened species further to the provincial policy statement subsection 2.1.7? ☐ Yes ☒ No

If no, please explain:

No change in land use proposed

3. Have the subject lands been screened to ensure that development or site alteration will not have any impact on source water protection? ☐ Yes ☒ No

If no, please explain:

No change in land use proposed

Note: If in an area of source water WHPA A, B or C please attach relevant information and approved mitigation measures from the Risk Manager Official.

4. Are any of the following uses or features on the subject lands or within 500 metres of the subject lands, unless otherwise specified? Please check boxes, if applicable.

**Livestock facility or stockyard** (submit MDS Calculation with application)

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Wooded area**

☒ On the subject lands or ☒ within 500 meters – distance \_\_\_\_\_

**Municipal Landfill**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Sewage treatment plant or waste stabilization plant**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Provincially significant wetland (class 1, 2 or 3) or other environmental feature**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Floodplain**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Rehabilitated mine site**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Non-operating mine site within one kilometre**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Active mine site within one kilometre**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Industrial or commercial use (specify the use(s))**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Active railway line**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Seasonal wetness of lands**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Erosion**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_

**Abandoned gas wells**

☐ On the subject lands or ☐ within 500 meters – distance \_\_\_\_\_





## F. Servicing and Access

1. Indicate what services are available or proposed:

Water Supply

- |   |  |
|---|--|
| <input type="radio"/> Municipal piped water       | <input type="radio"/> Communal wells         |
| <input checked="" type="radio"/> Individual wells | <input type="radio"/> Other (describe below) |
- 

Sewage Treatment

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

Storm Drainage

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

2. Existing or proposed access to subject lands:

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

Name of road/street:

Norfolk County Road 23

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## G. Other Information

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

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

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2. Is there any other information that you think may be useful in the review of this application? If so, explain below or attach on a separate page.
-

## **H. Supporting Material to be submitted by Applicant**

In order for your application to be considered complete, folded hard copies (number of paper copies as directed by the planner) and an **electronic version (PDF) of the site plan drawings, additional plans, studies and reports** will be required, including but not limited to the following details:

1. Concept/Layout Plan
2. All measurements in metric
3. Existing and proposed easements and right of ways
4. Parking space totals – required and proposed
5. All dimensions of the subject lands
6. Dimensions and setbacks of all buildings and structures
7. Names of adjacent streets
8. Natural features, watercourses and trees

In addition, the following additional plans, studies and reports, including but not limited to, **may** also be required as part of the complete application submission:

- ☐ Zoning Deficiency Form
- ☒ On-Site Sewage Disposal System Evaluation Form
- ☐ Environmental Impact Study
- ☐ Geotechnical Study / Hydrogeological Review
- ☐ Minimum Distance Separation Schedule
- ☐ Record of Site Condition
- ☐ Agricultural Impact Assessment

Your development approval might also be dependent on Ministry of Environment and Climate Change, Ministry of Transportation or other relevant federal or provincial legislation, municipal by-laws or other agency approvals.

**All final plans must include the owner's signature as well as the engineer's signature and seal.**

## I. Transfers, Easements and Postponement of Interest

The owner acknowledges and agrees that if required it is their solicitor's responsibility on behalf of the owner for the registration of all transfer(s) of land to the County, and/or transfer(s) of easement in favour of the County and/or utilities. Also, the owner further acknowledges and agrees that it is their solicitor's responsibility on behalf of the owner for the registration of postponements of any charges in favour of the County.

### Permission to Enter Subject Lands

Permission is hereby granted to Norfolk County officers, employees or agents, to enter the premises subject to this application for the purposes of making inspections associated with this application, during normal and reasonable working hours.

### Freedom of Information

For the purposes of the *Municipal Freedom of Information and Protection of Privacy Act*, I authorize and consent to the use by or the disclosure to any person or public body any information that is collected under the authority of the *Planning Act, R.S.O. 1990, c. P. 13* for the purposes of processing this application.

\_\_\_\_\_  
Owner/Applicant/Agent Signature

Nov 23/18  
\_\_\_\_\_  
Date

## J. Owner's Authorization

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

I/We Larry and Patricia Ayres am/are the registered owner(s) of the lands that is the subject of this application for site plan approval.

I/We authorize David Roe, Civic Planning Solutions Inc. to make this application on my/our behalf and to provide any of my/our personal information necessary for the processing of this application. Moreover, this shall be your good and sufficient authorization for so doing.

Larry Ayres  
Owner

Oct 22 / 2018  
\_\_\_\_\_  
Date

Marlene Ayres  
Owner

Oct 22 / 2018  
\_\_\_\_\_  
Date

**K. Declaration**

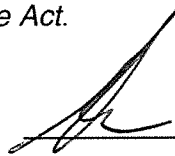
I, David Roe of Norfolk County

solemnly declare that:

all of the above statements and the statements contained in all of the exhibits transmitted herewith are true and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of *The Canada Evidence Act*.

Declared before me at:

Langton



Owner/Applicant/Agent Signature

In Norfolk County

This 23<sup>rd</sup> day of November

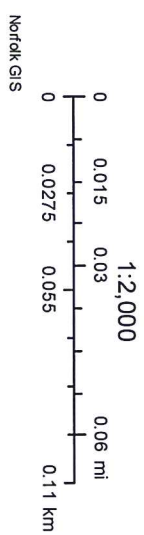
A.D., 20 18



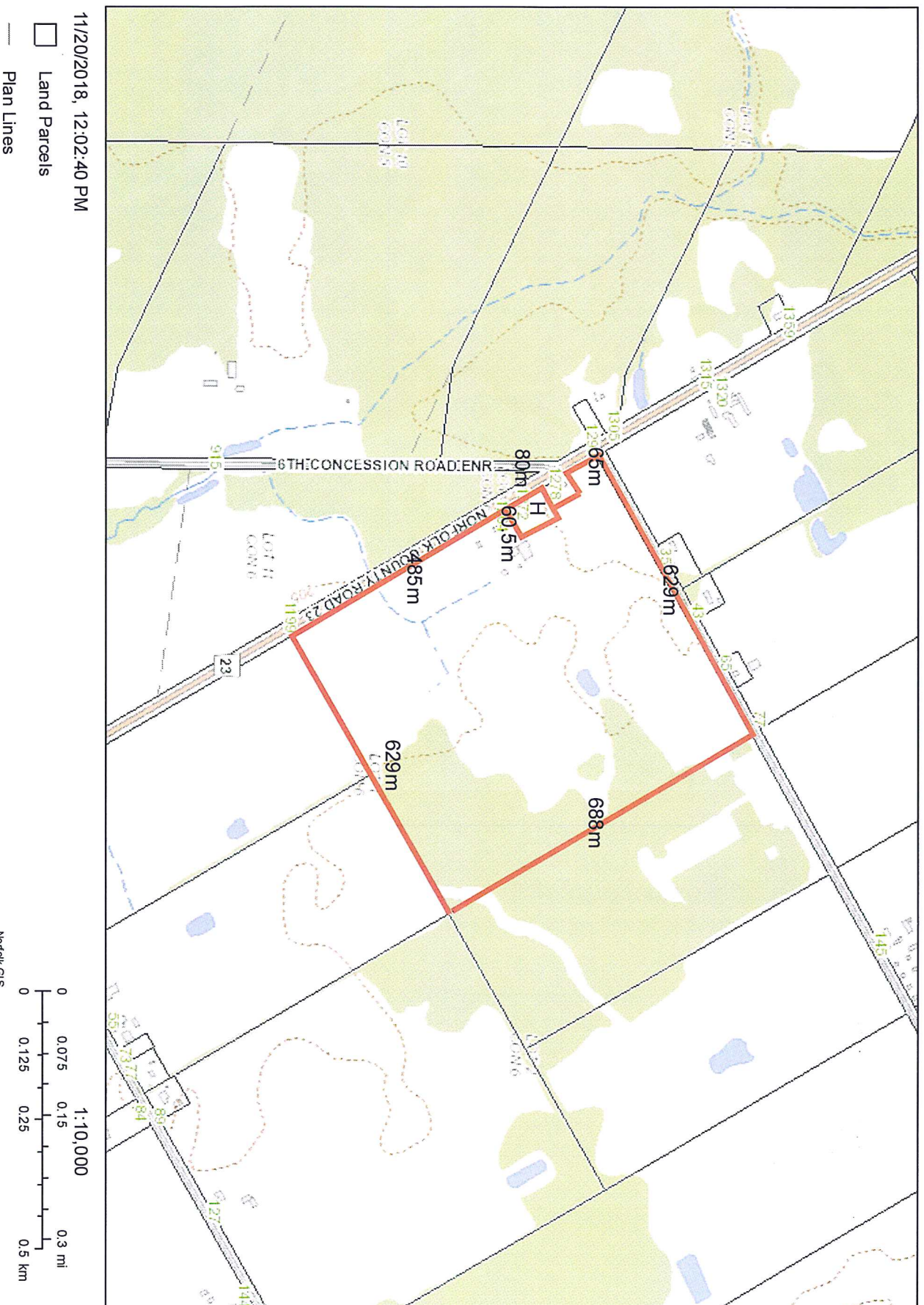
A Commissioner, etc.

☐ Land Parcels

☐ Plan Lines



# MAP NORFOLK - Community Web Map







Working together with our community  
to provide quality services.

# Evaluation Form for Existing On-Site Sewage Systems

Lot to be severed

Date: July 2009

<b>OFFICE USE ONLY</b>		<b>FILE NO.:</b>	<b>DATE RECEIVED:</b>	
<b>PROPERTY INFORMATION</b>		Municipal Address: 1272 Norfolk County Road 23		
Owner: Larry Ayres		519-875-2847	Lot: 1	Concession: 6
Lot Area: 4240m <sup>2</sup>	Lot Frontage: 810m	Assessment Roll No. 5430100430000000		
<b>PURPOSE OF EVALUATION</b>	<input checked="" type="checkbox"/> Consent <input 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: 3	No. of Fixture Units: 29	Is the building currently occupied? (Yes) / No If No, how long?	
<b>EVALUATOR'S INFORMATION</b>	Evaluator's Name: Larry Dedrick		Company Name: Dedrick Bros. Excavating Ltd.	
Address:	370 Lynedoch Rd, Delhi, Ont.		Postal Code: N4B 2W4	Phone: 519-592-2069
Email:	dbel@kwic.com		BCIN #	16930
<b>SITE EVALUATION</b>	Ground Cover (trees, bushes, grass, impermeable surface): Grass.		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' Plus ft.	
Surface Discharge Observed: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Odour Detected: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Current Weather (at time of evaluation): Sunny	
<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: 800 Gal.		Pump: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Distribution System: Area: <input checked="" type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium	No. of Tile Runs: 7 @ 50'	Total Length of Tile: 350 ft.	Distance Between Tile Runs: 6' ft.	
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 checked="" type="checkbox"/> Sand <input checked="" type="checkbox"/> Top Soil <input type="checkbox"/> Seeded		
<b>Setbacks:</b>		<b>Tank</b>		
Distance to Buildings & Structures (ft)	17'		<b>Distribution Pipe</b>	
Distance to Bodies of Water (ft)	N/A		27'	
Distance to Nearest Well (ft)	80 ft		N/A	
Distance to Proposed Property Lines	Front 131' Rear 69' Side 181' Side 98'		Front 141' Rear 162' Side 110'	

Endweeping Trenches  
86' From Rear House  
wall





# HALDIMAND-NORFOLK REGIONAL HEALTH DEPARTMENT

365 West Street, Box 247, Simcoe, Ontario N3Y 4L1 — Telephone: 426-6170

Branch Office: 45 Munsee St., Box 128, Cayuga, Ontario N0A 1E0 — Telephone: 772-3313

Page 1 of 2

## APPLICATION FORM AND CERTIFICATE OF APPROVAL FOR A CLASS 2-6 SEWAGE SYSTEM

(PLEASE PRINT CLEARLY)

Application No. N-7635  
Fee Receipt No. 201761  
Date Received Nov. 12/93

1. Name of Owner <b>Larry Ayres</b>	Tel. No. <b>875-2847</b>	2. Installer's Name <b>George Rutledge</b>	Tel. No. <b>875-3348</b>
--	-----------------------------	---	-----------------------------

Mailing Address <u>R.R. # 1,</u> <u>Walsingham, Ontario</u> (No., Street, City, Town, etc.) Postal Code <u>N0E 1X0</u>	Address <u>R.R. # 4</u> <u>Langton, Ontario</u> (No., Street, City, Town, etc.) Postal Code <u>N0E 1G0</u>
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3. Propose to Install a Class 4 sewage system to serve Single Family  
(Construct/Install/Alter/Extend/Enlarge) (Facility: e.g. Single Family Dwelling, Motel, etc.)

4. Location — Region, County, District <b>Haldimand Norfolk</b>	Ward, Township, Town <b>S. Walsingham</b>	Lot No. <b>P.1</b>	Conc. No. <b>6</b>	Sub. Lot No.	Plan No.	Area of Lot (sq. m.) <b>1 acre</b>
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5. State No. of	Bedrooms or Motel Units <b>3</b>	People <b>4</b>	Flush Toilets <b>4</b>	Urinals <b>0</b>	Washbasins <b>6</b>	Showers and Bathubs <b>3</b>	6. Water Supply Dug or Bored Well <input type="checkbox"/> Drilled Well <input checked="" type="checkbox"/> Municipal <input type="checkbox"/> Other <input type="checkbox"/> Proposed <input type="checkbox"/> or Existing <input type="checkbox"/>
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7. Attach completed sketch on Page 2 — List other attachments:

8. Relationship to Severance if applicable <b>Minor Variance</b> Lot Approval Pending <input type="checkbox"/> Lot Approved Under Severance Application No. ....	9. Directions to Lot: — Highway No., Secondary Roads, Signs to Follow, etc. <u>REG. RD. 60 WEST TO REG. RD. 23</u> <u>NORTH EAST 1ST CONC. ON EAST SIDE OF ROAD (RIGHT)</u>
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10. I certify that the above information is complete and correct and that, if approved, the work will conform with Provincial requirements for sewage systems and local Municipal By-Laws. (Attach fee for Class 4, 5 or 6 systems).

Name of Agent <b>Wray Fick</b>	Tel. No. <b>586-7980</b>	Signature of Owner or Agent <i>Wray Fick</i>
Address <u>R.R. # 5</u> <u>Langton, Ontario</u>		Date <u>Nov. 5/93</u>

11. INSPECTOR'S REPORT	Inspection Time and Date <u>Nov. 5</u> 19 <u>93</u> AM PM	Sub-Surface Conditions Encountered
Weather	Representing Owner	Rock & G.W.T.
	Leaching Bed Design Criteria Depth to Rock Design H.W.T. ..... M ..... M	Depth (m) 0 0.25 0.50 0.75 1.00 1.25 1.50
REQUIREMENTS	Lineal metres of Distribution Pipe <u>350 FEET</u>	Working Capacity of Septic/Holding Tank Litres <u>800 GALLONS</u>

Conditions of Approval and Reasons (e.g. fill, grading, drainage improvements, design sewage flows) ☒  
OR  
Reasons where Proposal not Acceptable (add additional pages if required) ☐

Personal information contained on this form is collected under the authority of the Health Protection and Promotion Act, 1983 for the purposes of public health services. Questions about this collection should be directed to the Regional Clerk, The Regional Municipality of Haldimand-Norfolk.

MAINTAIN REQUIRED DISTANCES OF 1.10 FEET FROM ALL LOT LINES  
17 FEET FROM ALL STRUCTURES  
50 FEET FROM PROPOSED DRILLED WELL  
SEE ATTACHED CONDITIONS REGARDING SOIL CONDITIONS

# HALDIMAND-NORFOLK REGIONAL HEALTH DEPT.

Page 2 of 2

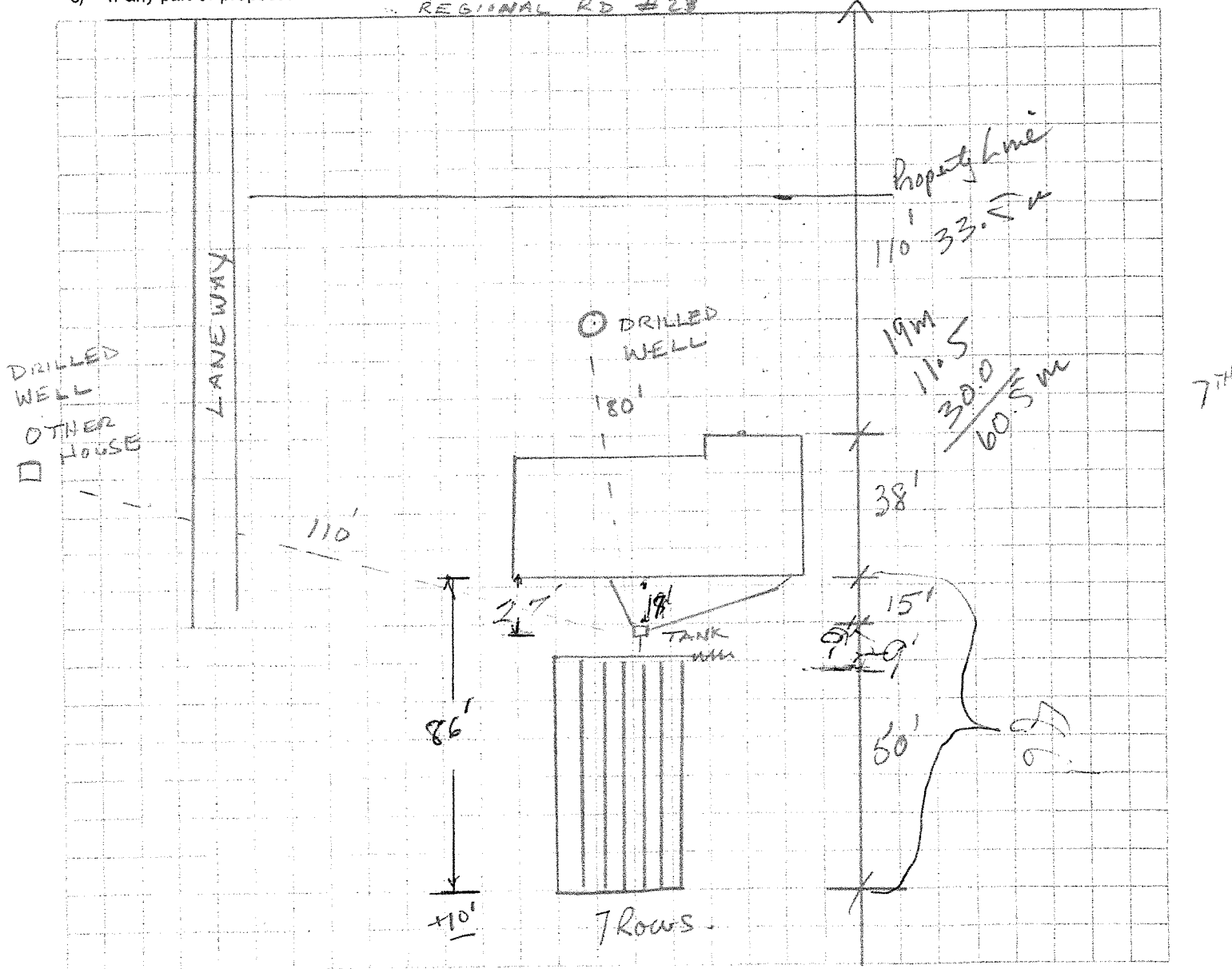
365 West Street, Box 247, Simcoe, Ontario N3Y 4L1 — Telephone: 426-6170

Branch Office: 45 Munsee St., Box 128, Cayuga, Ontario N0A 1E0 — Telephone: 772-3313

APPLICATION NO.

N. 7635

12. LOT DIAGRAM AND SEWAGE SYSTEM PLAN: — Draw to scale indicating north point and showing:
- Location of sewage system components (e.g. tanks, leaching bed). Locate and show horizontal distances from system to adjacent existing or proposed buildings, water supplies (including neighbours), existing on-site sewage systems, driveways, property lines, lakes, rivers, water courses, swimming pools.
  - Lot dimensions, topographic features (e.g. swamps, steep slopes) near system.
  - If any part of proposal conforms to a specific standard drawing, give reference number(s).



13. Certificate of Approval for this application is refused for the reasons given in Section 11 Page 1.

INSPECTED AND RECOMMENDED BY

REFUSED

DATE

DIRECTOR

## CERTIFICATE OF APPROVAL

Application approved and this Certificate of Approval under Section 64 of The Environmental Protection Act, 1980 is hereby issued for the proposal outlined on Pages 1 and 2 of the application and its attachments as amended by the requirements and conditions of Section 11 provided that the sewage system shall be completed and a Use Permit issued within 12 months of the issue hereof or such extended period as the Director on application allows. DO NOT OPERATE THE SYSTEM UNTIL A USE PERMIT IS ISSUED.

INSPECTED AND RECOMMENDED BY

ISSUED

DATE

Bob McClary

A. H. Kinnear

DIRECTOR

Nov 10/93

Under Section 121 of The Environmental Protection Act, 1980, an applicant may appeal a decision by writing to the Director and to the Environmental Appeal Board, 3 St. Clair Avenue West, Toronto, Ont., M4V 1K7 within 15 days of receipt of the decision.

112 SUITE 302 OFFICE COPY 103



Working together with our community  
to provide quality services.

# Evaluation Form for Existing On-Site Sewage Systems

Retained Lot

Date: July 2009

<b>OFFICE USE ONLY</b>		<b>FILE NO.:</b>		<b>DATE RECEIVED:</b>	
<b>PROPERTY INFORMATION</b>		Municipal Address: 1264 Norfolk County Road 23			
Owner: Larry Ayres		519-875-2847		Lot: 1	Concession: 6
Lot Area: 97.5 ac	Lot Frontage: 65m + 405m	Assessment Roll No. 5430100430000000			
<b>PURPOSE OF EVALUATION</b>		<input checked="" type="checkbox"/> Consent <input 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: 2	No. of Fixture Units: 20	Is the building currently occupied? (Yes) / No If No, how long?		
<b>EVALUATOR'S INFORMATION</b>		Evaluator's Name: Larry Dadrick Company Name: Dadrick Bros. Excavating L.P. Address: 370 Lynedoch Rd, Delhi, Ont Postal Code: N4B 2W4 Phone: 519-592-2069 Email: lbel@kwic.com BCIN #: 16930			
<b>SITE EVALUATION</b>		Ground Cover (trees, bushes, grass, impermeable surface):		Soil Type: Sand	
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: 5' Plott.	
Surface Discharge Observed: Yes (No)		Odour Detected: Yes (No)		Current Weather (at time of evaluation): Cloudy	
<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 800gal		Size: 800 Gal.		Pump: Yes (No)	
Distribution System: Area: <input checked="" type="checkbox"/> Trench Bed <input type="checkbox"/> Filter Medium		No. of Tile Runs: 54 x 60'	Total Length of Tile: 300 ft.	Distance Between Tile Runs: 6 ft	
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 checked="" type="checkbox"/> Sand <input checked="" type="checkbox"/> Top Soil <input checked="" type="checkbox"/> Seeded		
<b>Setbacks:</b>		<b>Tank</b>		<b>Distribution Pipe</b>	
Distance to Buildings & Structures (ft)		5' & 19' Corner		30'	
Distance to Bodies of Water (ft)		N/A		N/A	
Distance to Nearest Well (ft)		45'		80'	
Distance to Proposed Property Lines		Front 70' Rear _____ Side 78' Side _____ W N		Front 49' Rear _____ Side 138' Side _____ W N	

**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) 426-5870 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, Larry Ayres (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.

Owner Signature David Roe (Agent)

Date

**EVALUATOR:**

1. I, Larry Dedrick 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.

  
Evaluator SignatureNov. 10 / 18  
Date**BUILDING DIVISION COMMENTS**

Comments:

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

Chief Building Official or designate

Date

Revised: March 16, 2016



# On Site Sewage Disposal System Location Plan

DATE: Nov 10 / 2018

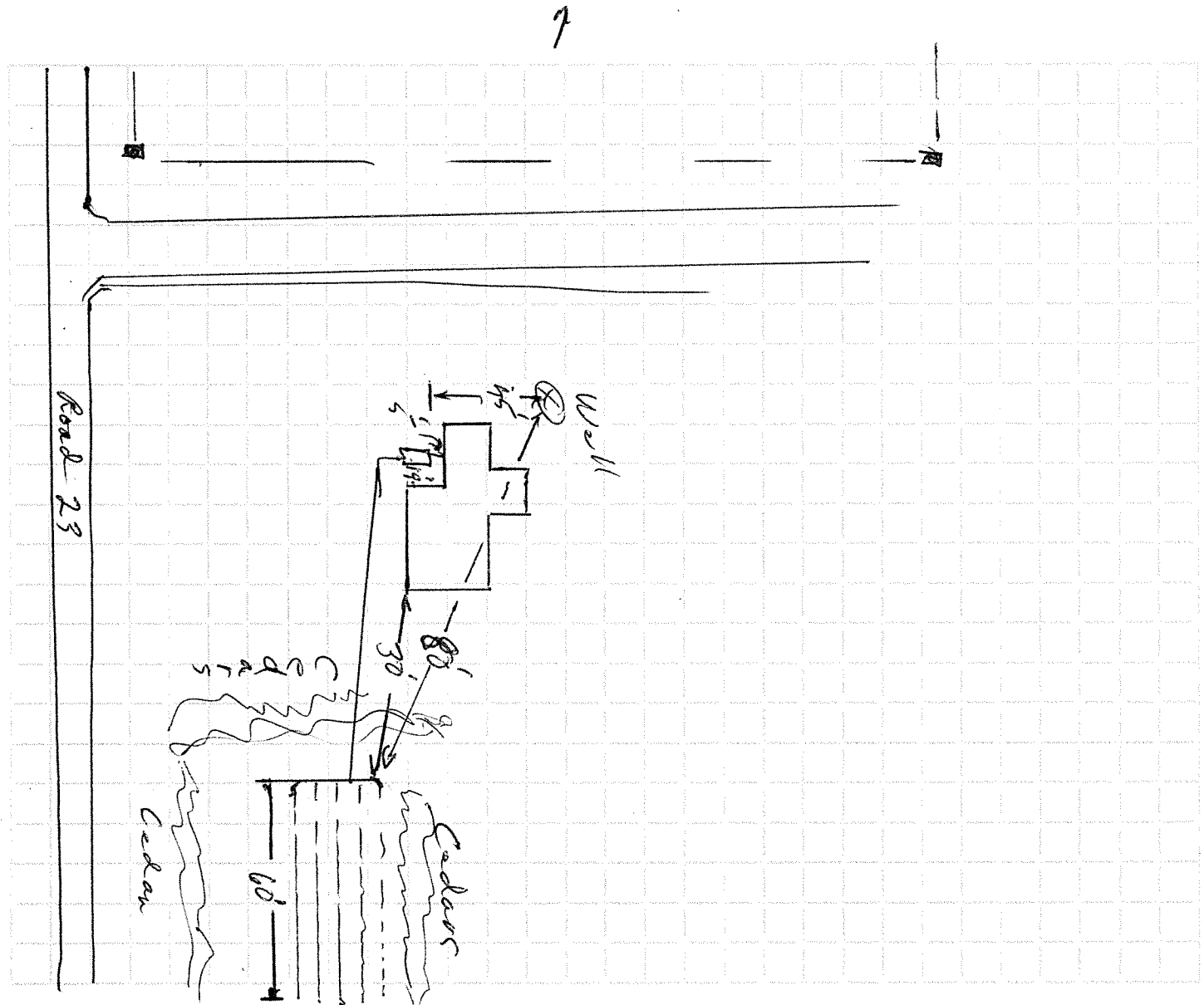
APPLICATION NUMBER: \_\_\_\_\_

OWNER Larry Ayres

EVALUATOR Larry Pedrick

PROPERTY ADDRESS 1264 Norfolk County Road 23

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: \_\_\_\_\_

NOTE: The above sketch is not to exact scale.

# HALDIMAND-NORFOLK REGIONAL HEALTH DEPARTMENT

255 West Street, Box 247, Simcoe, Ontario N3Y 4L1 — Telephone: 426-6170  
Branch Office: 45 Munsee St., Box 128, Cayuga, Ontario N0A 1E0 — Telephone: 772-3313

Page 1 of 2

## APPLICATION FORM AND CERTIFICATE OF APPROVAL FOR A CLASS 2-6 SEWAGE SYSTEM

(PLEASE PRINT CLEARLY)

Application No.	N. 5476
Fee Receipt No.	118549
Date Received	Apr. 19/88

1. Name of Owner <b>LARRY AYRES</b>	Tel. No. <b>519-875-2847</b>	2. Installer's Name <b>GEORGE RUTLEDGE</b>	Tel. No. <b>875-3348</b>
Mailing Address <b>RR 1 WALSINGHAM</b>		Address <b>RR 4 LANGTON</b>	
(No., Street, City, Town, etc.)		(No., Street, City, Town, etc.)	
Postal Code <b>N0E 1X0</b>		Postal Code <b>N0E 1G0</b>	

3. Propose to **TRAILER** a Class **4** sewage system to serve **SEASONAL HELP**  
(Construct/Install/Alter/Extend/Enlarge) (Facility: e.g. Single Family Dwelling, Motel, etc.)

4. Location — Region, County, District <b>HALDIMAND NORFOLK</b>	Ward, Township, Town <b>SOUTH WALSINGHAM</b>	Lot No. <b>1</b>	Conc. No. <b>6</b>	Sub. Lot No.	Plan No.	Area of Lot (sq. m.)
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5. State No. of	Bedrooms or Motel Units <b>2</b>	People	Flush Toilets <b>1</b>	Urinals	Washbasins <b>2</b>	Showers and Bathtubs <b>1</b>	6. Water Supply
							Dug or Bored Well <input checked="" type="checkbox"/> <b>POINT</b>
							Drilled Well <input type="checkbox"/> Municipal <input type="checkbox"/>
							Other <input type="checkbox"/> Proposed <input type="checkbox"/> or Existing <input type="checkbox"/>

7. Attach completed sketch on Page 2 — List other attachments:

8. Relationship to Severance if applicable	9. Directions to Lot: — Highway No., Secondary Roads, Signs to Follow, etc.
<input type="checkbox"/> Lot Approval Pending <input type="checkbox"/> Lot Approved Under Severance Application No. ....	<b>59. HIGHWAY SOUTH TO 7<sup>th</sup> CON, TURN WEST, GO ABOUT 5 MILES TO STOP SIGN, TURN SOUTH, FIRST PLACE ON LEFT.</b>

10. I certify that the above information is complete and correct and that, if approved, the work will conform with Provincial requirements for sewage systems and local Municipal By-Laws. (Attach fee for Class 4, 5 or 6 systems).

Name of Agent	Tel. No.	Signature of Owner or Agent <b>Larry Ayres</b>
Address (No., Street, City, Town, etc.)		Date <b>April 11/88</b>

11. INSPECTOR'S REPORT	Inspection Time and Date <b>4:00 PM 12-4-88</b>	Sub-Surface Conditions Encountered
Weather	Representing Owner	Rock & G.W.T.
Leaching Bed Design Criteria		Depth (m)
Depth to Rock		Soil Type
Design H.W.T.		<b>0</b>
..... M		<b>0.25</b>
..... M		<b>0.50</b>
REQUIREMENTS		<b>0.75</b>
Lineal metres of Distribution	Working Capacity of Septic/Holding Tank	<b>1.00</b>
Pipe <b>200'</b>	Litres <b>800 GAL</b>	<b>1.25</b>
		<b>1.50</b>

Conditions of Approval and Reasons (e.g. fill, grading, drainage improvements, design sewage flows) ☐  
OR  
Reasons where Proposal not Acceptable (add additional pages if required) ☐

IMPORTANT: "Health Unit approval does not prejudice or imply compliance with the pertinent zoning by-laws. Complete details respecting the zoning (PERMITTED USE) of property should be checked through the Regional Department of Buildings, Zoning and By-law Enforcement."

① install in location discussed during our meeting of 12-4-88 ② protect any piping that may be subject to vehicular traffic such as culvert ③ install as per regs under the E.P.B.

OFFICE COPY

HEALTH UNIT APPROVAL WILL NOT PREJUDICE OR IMPLY ANY PLANNING APPROVAL

8/1/88  
May 27/88  
Ogg

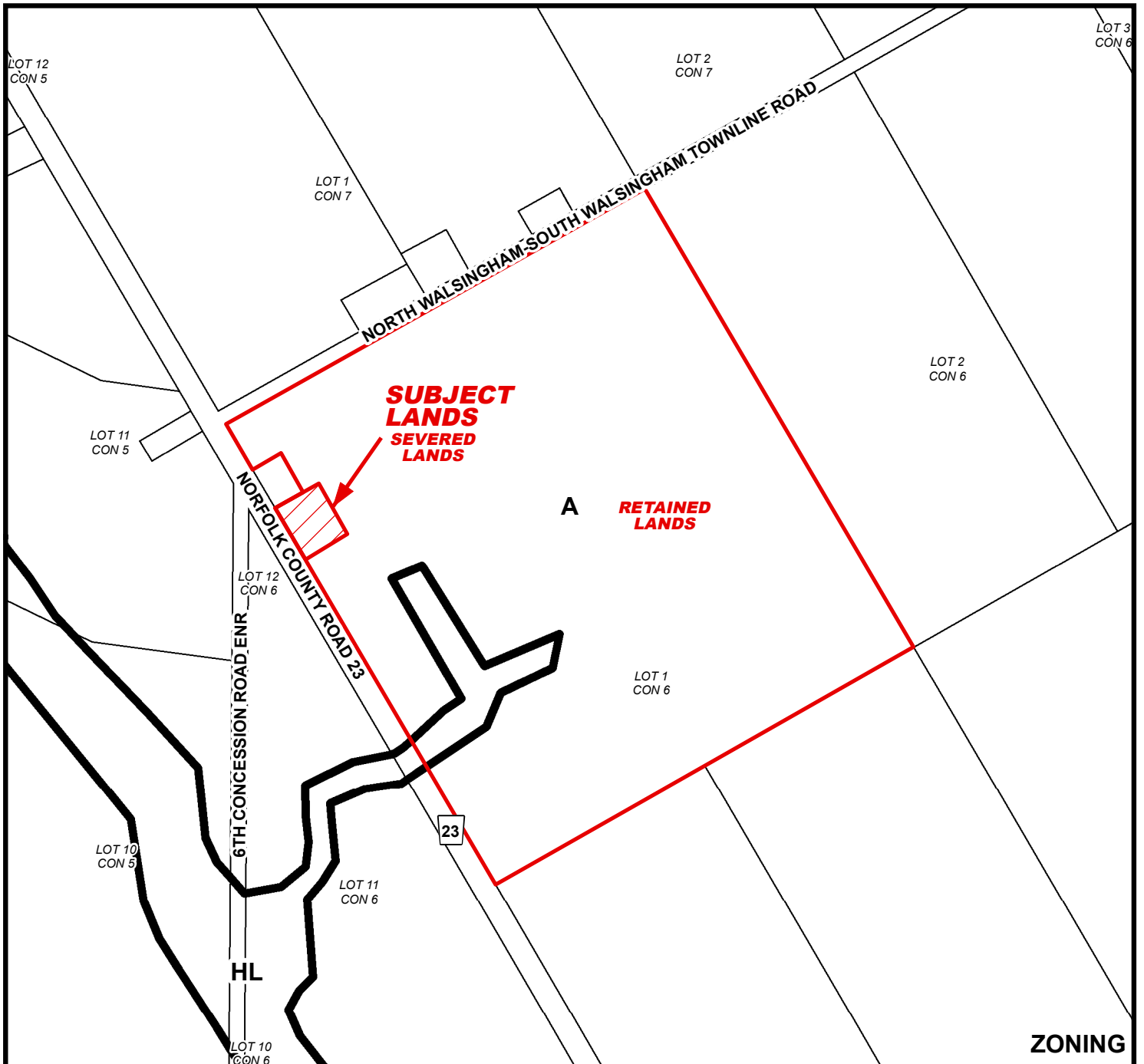
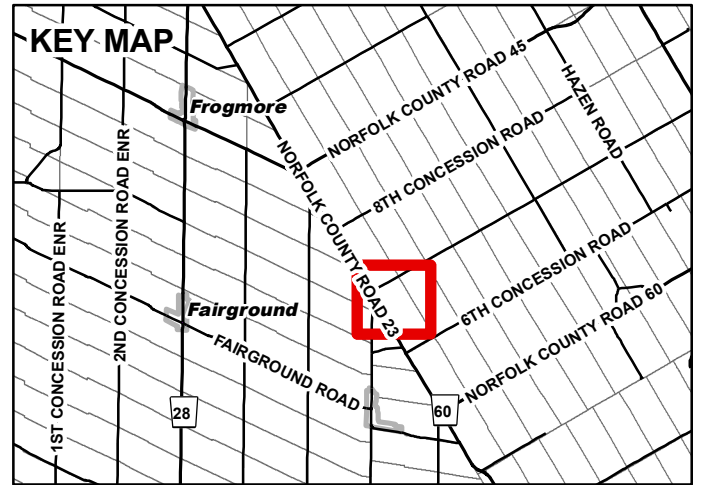
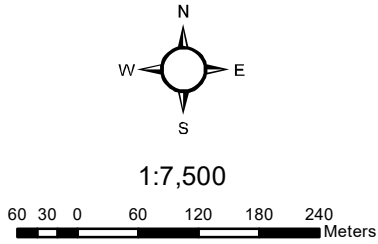
NOTE: Section 64(a) of The Act provides that no change can be made to any building(s) or structure(s) in connection with which this sewage system is used, if the operation or effectiveness of the sewage system will or is likely to be affected by the change, unless a new Certificate of Approval is obtained. Section 121 of The Act provides that an applicant for a permit may appeal a decision to refuse to issue a permit. Written notice of appeal must be forwarded to the Director (who refused to issue the permit) and to the Environmental Board, 1 St. Clair Avenue West, Toronto, Ontario, M4V 1X7 within 15 days of receipt of a permit.

# MAP 1

## File Number: BNPL2018297

Geographic Township of

## SOUTH WALSINGHAM



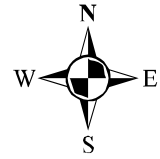
**ZONING**



# MAP 2

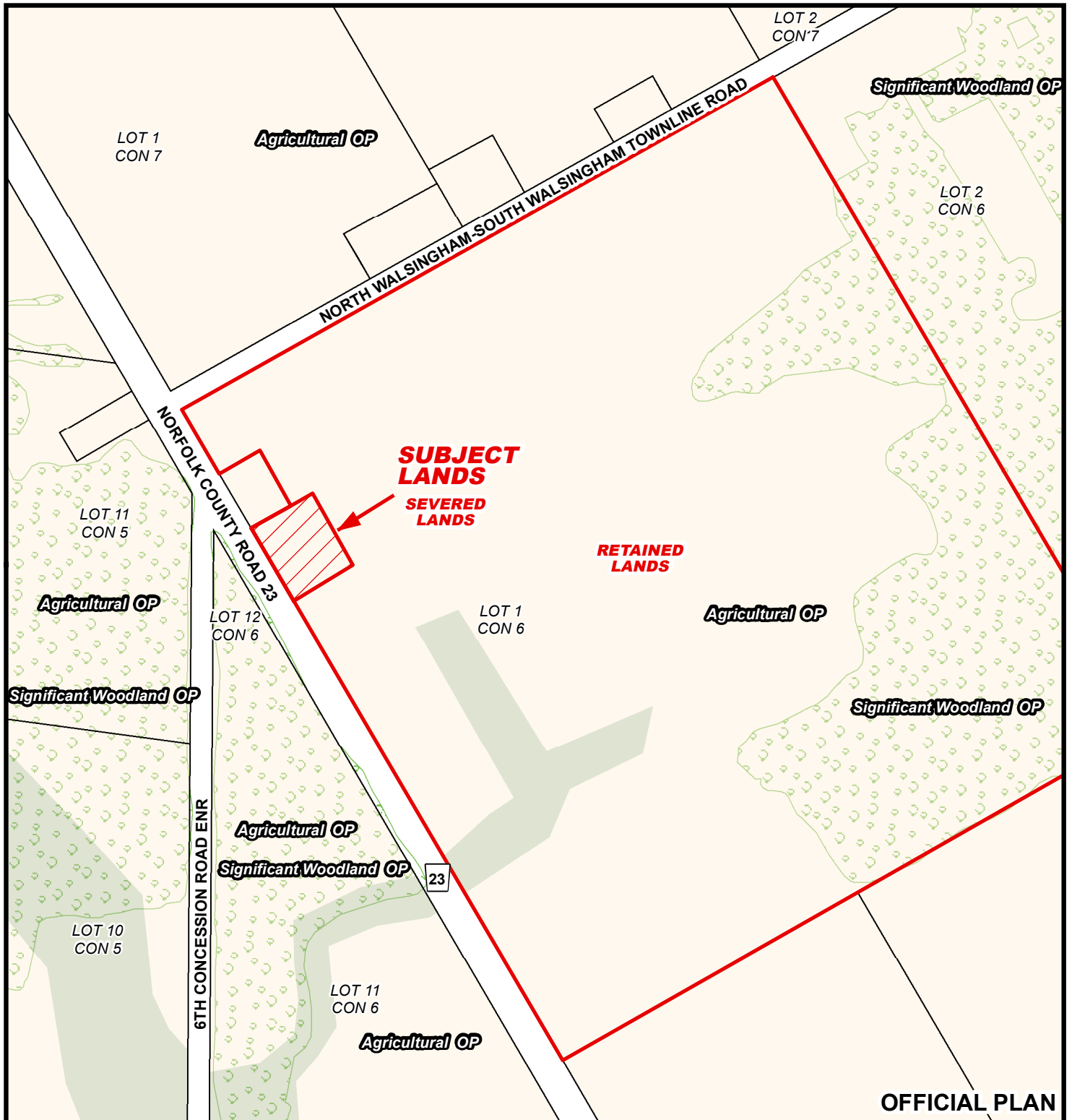
File Number: BNPL2018297

Geographic Township of SOUTH WALSINGHAM



20 10 0 20 40 60 80 Meters

1:5,000

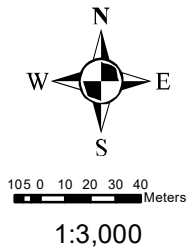




# MAP 3

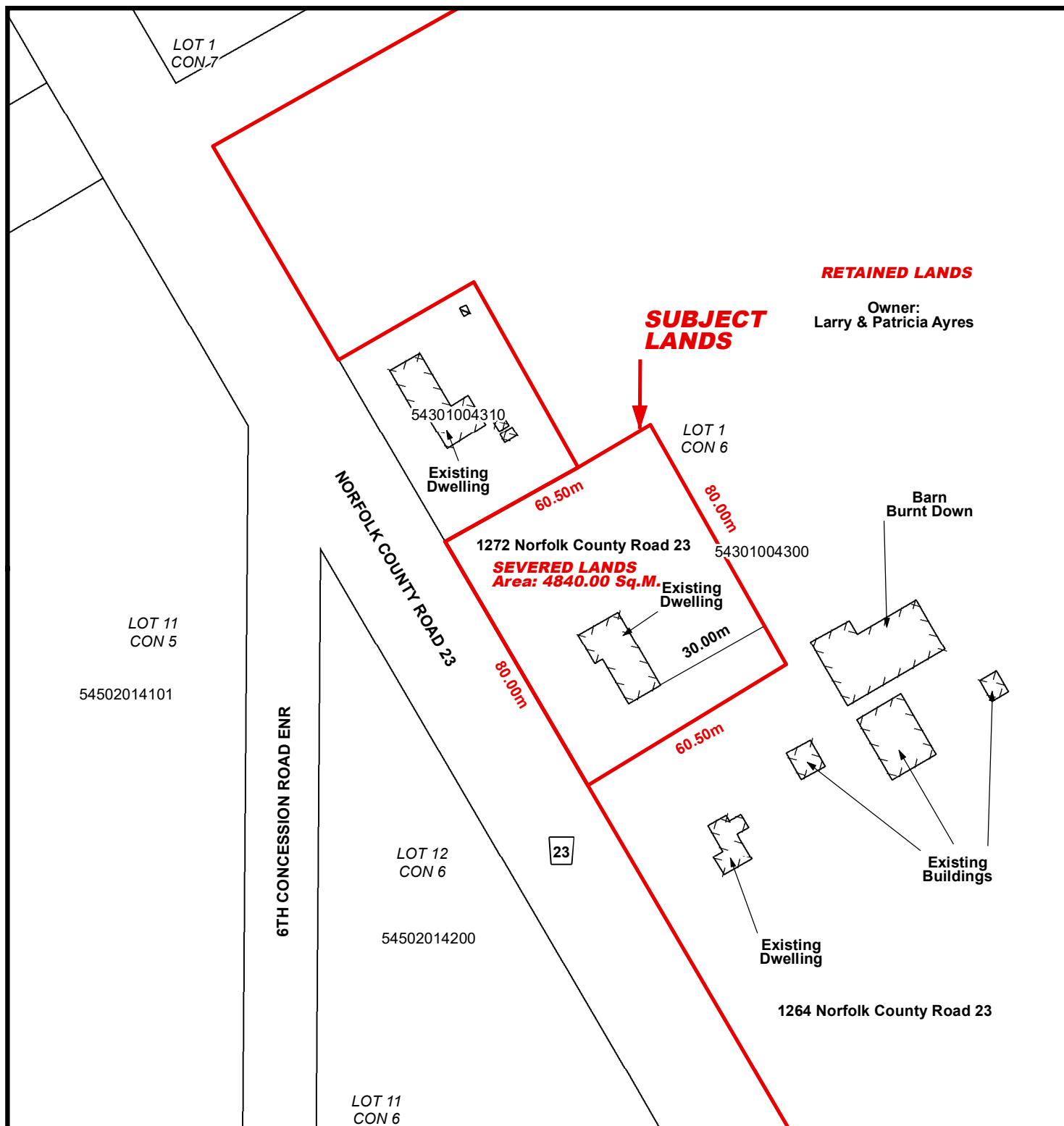
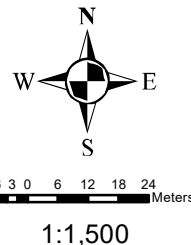
File Number: BNPL2018297

Geographic Township of SOUTH WALSINGHAM





## Geographic Township of SOUTH WALSINGHAM



# LOCATION OF LANDS AFFECTED

File Number: BNPL2018297

Geographic Township of SOUTH WALSHINGHAM

