



Town of Aurora
Consent Application Form

Planning and Development Services

Development Planning Division
Committee of Adjustment Section

Phone: 905-726-4700
Fax: 905-726-4736
Email: planning@aurora.ca

Town of Aurora
100 John West Way,
Box 1000, Aurora, ON L4G 6J1
www.aurora.ca

January 2024



Consent Application Form

This Application Form is available in digital format on the Town’s Website under Planning and Development Services or contact planning@aurora.ca via e-mail or by calling 905-726-4700 for a copy. A processing fee in the amount specified on the Fee Calculation Worksheet shall be made payable to **The Town of Aurora (Cheque)**. The fee must be delivered to Planning and Development Services at Town Hall located on the 3rd floor, quoting the address of the proposed development. Please note that this fee is **non-refundable** regardless of the outcome pertaining to this request. Planning Applications will not be accepted unless the full Application fee and required material is received.

The undersigned hereby applies to the Committee of Adjustment for the Town of Aurora under Section 53 of the *Planning Act*, for relief, as described in this Application Form, from the Town’s Comprehensive Zoning By-law (*as Amended*).

Applicants who wish to apply to the Committee of Adjustment must first have the Preliminary Zoning Review completed by the Building Division staff. To obtain information regarding this process, please contact building@aurora.ca via e-mail or by calling 365-500-2081

1. Complete Application

When was the Pre-consultation meeting held with Town Staff?

Which staff member(s) were in attendance?

Comments

2. Preliminary Zoning Review

Has the Preliminary Zoning Review Form completed and attached? Yes No

Is the Application consistent with information provided in the Preliminary Zoning Review Form?

Yes No

If not, you must speak to the Building Division staff directly.



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3. Owner/Applicant/Agent Information

(Please list additional Property Owners on an attached schedule, if applicable)

Registered Owner(s) _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____ E-mail _____

Applicant(s) _____

(If different than above)

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____ E-mail _____

Agent(s):

(Solicitor/Consultant, if applicable) _____

Contact _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____ E-mail _____

Send correspondence to:

(Check off the appropriate box)

- Owner
- Applicant
- Agent
- All



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4. Location and description of property

Legal Description of the subject land:

Municipal Address _____
(If applicable)

Legal Description _____

Other _____

Size of Property

Area _____ (hectares) _____ (acres)

Frontage _____ (meters) _____ (feet)

Depth _____ (meters) _____ (feet)

5. Purpose of the application

Purpose of the proposed request. (Check off the appropriate box)

Creation of new lot

Addition to a lot

An easement or right of way

Other purpose (specify) _____

Other

A mortgage or charge

A lease

A validation of title



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Number of new lots proposed (Not including retained lots) _____

For a lot addition, identify the lands to which the parcel will be added _____

Name of person(s), if known, to which land or interest in the land is intended to be transferred, leased or charged (i.e., purchaser, lessee, mortgagee, etc.)

6. Description of lands intended to be severed / Subject of an easement /Other

Area _____ (hectares) _____ (acres)

Frontage _____ (meters) _____ (feet)

Depth _____ (meters) _____ (feet)

Existing Use _____

Proposed Use _____

Number and the use of the buildings and structures on the land to be severed (Both existing and proposed)

7. Description of land intended to be retained or residual lands

Area _____ (hectares) _____ (acres)

Frontage _____ (meters) _____ (feet)

Depth _____ (meters) _____ (feet)

Existing Use _____

Proposed Use _____



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Number and the use of the buildings and structures on the land to be retained _____

8. Existing easements / Restrictive covenants

Are there any easements or restrictive covenants affecting the subject land? Yes No

If yes, describe the easement or covenant and its effect _____

9. Parcel Abstract

Submission of Parcel Abstract (PIN) for the property purchased from Ontario's Ministry of Government Services (showing deleted instruments) dated within 2 weeks of application submission

Yes No

*Please note, if parcel abstract (PIN) is not provided, Legal Services will charge a fee to obtain one on the applicant's behalf.

10. Access

Type of road access (check the appropriate box)

	Proposed Lot	Retained Lot
Provincial Highway	<input type="checkbox"/>	<input type="checkbox"/>
Regional Road, maintained all year	<input type="checkbox"/>	<input type="checkbox"/>
Municipal Road, maintained all year	<input type="checkbox"/>	<input type="checkbox"/>
Other Public Road	<input type="checkbox"/>	<input type="checkbox"/>



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11. Water supply

Type of water supply (check the appropriate box)

	Proposed Lot	Retained Lot
Publicly owned and operated piped water system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated individual well	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated communal well	<input type="checkbox"/>	<input type="checkbox"/>
Lake or other body of water	<input type="checkbox"/>	<input type="checkbox"/>
Other means	<input type="checkbox"/>	<input type="checkbox"/>

12. Sewage disposal

Type of sewage disposal (check the appropriate box)

	Proposed Lot	Retained Lot
Publicly owned and operated sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated individual sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Privately owned and operated communal sewage system	<input type="checkbox"/>	<input type="checkbox"/>
Lake or other body of water	<input type="checkbox"/>	<input type="checkbox"/>
Other means	<input type="checkbox"/>	<input type="checkbox"/>

If a property is not municipally or publicly serviced, have you had the On-site Sewage System Form reviewed and completed by the Building Division staff? Yes No

If not, you are requested to contact the Building Division staff directly.



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13. Land use

Use or Feature	On the Subject Land	Within 500 Metres of Subject Land, unless otherwise specified (indicate approximate distance)
An agricultural operation, including livestock facility or stockyard		
A landfill		
A sewage treatment plant or waste stabilization plant		
A provincially significant wetland (Class 1, 2 or 3 wetland)		
A Flood plain		
An industrial or commercial use, and specify the use(s)		
An active railway line		

14. History of the property

Has the subject lands ever been the subject of an Application of a Plan of Subdivision or a Consent under the Planning Act? Yes No Unknown

If yes, and known, provide the Application File Number and the Decision made on the Application.

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

Yes No

If Yes, and if known, provide for each parcel severed, the date of transfer, the name of the transferee and the land use. _____

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15. Other current applications

Are the applicable lands the subject of an Application for a proposed Official Plan Amendment, Zoning By-law Amendment, Minor Variance, Consent, Approval of a Plan of Subdivision or other land development Application pursuant to the Planning Act. Yes No

If yes, specify the Application File Number and status of the Application _____

16. Survey of the property

The Application Form shall be accompanied by a survey drawn to a standard metric scale, showing the following:

- a) The boundaries and dimensions of any land abutting the subject land that is owned by the Owner of the subject land;
- b) The distance between the subject land and the nearest Township lot line or landmark such as a bridge or railway crossing;
- c) The boundaries and dimensions of the severed land, and the land to be retained;
- d) The location of all land previously conveyed from the parcel originally acquired by the current Owner of the subject land;
- e) The approximate location of all natural and artificial features on the subject lands and on the land that is adjacent to the subject land that, in the opinion of the Applicant may affect the Application, such as buildings, railways, roads, watercourses, drainage ditches, rivers or stream banks, wetlands, wooded areas, wells, septic tanks, and tile fields;
- f) The existing uses on adjacent land, such as residential, agricultural, and commercial;
- g) The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road or a right-of-way;
- h) If access to the subject land is by water only, the location of the parking and boat docking facilities to be used; and
- i) The location and nature of any easement affecting the subject land.

17. Fee calculation worksheet

Are the applicable fees attached? Yes No

Is the Fee Calculation Worksheet completed and attached? Yes No



Consent Application Form

Affidavit

I/We	of the Municipality of
In the Region of	
solemnly declare that all the statements contained in this Application Form 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 <i>The Canada Evidence Act</i> .	
SWORN before me at the (City/Town)	of(Municipality)
in the (Region,if Applicable)	of
This	day of , 20
Owner/Agent or Applicant	
Commissioner for Taking Affidavits, etc.	



Consent Application Form

Authorization of Owner(s)

I/We,

Hereby consent and authorize representatives of the Town of Aurora and those persons identified under the Planning Act, R.S.O. 1990 c. P.13, including the Members of the Committee of Adjustment, to enter upon the land subject to this application for the purpose of conducting any site inspections and take pictures which is necessary for the evaluation of this application.

Signature(s) of Owner(s)

I/We,

Hereby authorize (Name of Agent or person authorized to sign this Application Form)

to act as our Agent to sign this Application Form, to appear on my/our behalf at any hearing(s) in respect of the Application and to provide any information or material required by the Town in connection with this Application Form and I/We hereby authorize the Town to collect such information from my/our Agent.

Address

Legal Description

Signature(s) of Owner(s)

Name of Corporation

Name

Title

Dated this day of , 20

Signing Officer Signature and Corporation seals, if applicable

Per Name of Corporation

Name

Title

I/We have the authority to bind the corporation



Consent Application Form

Declaration of Site Plan

I,	
with respect to the Site Plan submitted with this Consent Application hereby declare that (please select one of the following):	
<input type="checkbox"/>	Where the Site Plan is a photocopy of a survey, I am the Owner of the copyright in the survey and hereby authorize the Town of Aurora to circulate this site plan;
<input type="checkbox"/>	The Site Plan of the property submitted by myself contains siting information provided by me and does not violate copyright in any survey related to the property which is the subject of this Application Form.
Dated this	day of 20
Signature of Owner/Applicant or Agent	



Consent Application Form

Sign Posting Affidavit

In the matter of the following Application(s) to the Town of Aurora Committee of Adjustment,		
Consent Application Number		
Last day for Posting Sign		
I/We		
hereby confirm that the required sign has been posted on the subject property in a prominent location		
at (Property Location/Address)		
on (Date of Posting)		
I did cause the Notice(s) of the Applicant(s) provided to me (the Applicant as the case may be) by the Secretary-Treasurer of the Committee of Adjustment of the Town of Aurora to be posted so as to be clearly visible and legible from a public highway, or other place to which the public has access on the subject land of the Application(s) or, where posting on the property was impractical, at a nearby location so as to adequately indicate to the public what property is the subject of the Application(s), in compliance with the <i>Planning Act</i> , R.S.O. 1990, c. P. 13, as amended.		
SWORN before me at the (City/Town)	of(Municipality)	
in the (Region if Applicable)	of	
This	day of	, 20
Owner/Agent or Applicant		
Commissioner for Taking Affidavits, etc.		



Consent Application Form

Public record notice and release

Public Record Notice: Pursuant to section 1.0.1 of the *Planning Act*, R.S.O. 1990, c. P.13, all information and material required in support of your Application Form will be made available to the public.

I understand and agree that my personal information, as well as any other information and material including, but not limited to, drawings, studies, plans, affidavits, etc., provided on this Application Form and/or required as part of this Application Form, will be used to create a record that is available to the general public and I do hereby authorize and consent to the release, disclosure, copying and distribution of any such information and/or material to any person or public body.

I also understand and agree that The Corporation of the Town of Aurora (*the "Town"*) is not responsible for protecting and/or enforcing copyrights or any other intellectual property rights that might attach to any information or material provided or submitted as part of this Application Form.

By signing below, I agree to the foregoing and I also agree to release, waive and forever discharge the Town from all actions, claims, demands, losses, costs, damages, suits, proceedings or liabilities whatsoever related to: (a) the collection, handling and release of any information provided on this form and/or required as part of this Application Form; and (b) any copyright or intellectual property rights that might attach to any information or material submitted as part of this Application Form and made available to the public by the Town pursuant to section 1.0.1 of the *Planning Act*.

Signature of Owner/Applicant or Agent

Date



100 John West Way
Aurora, Ontario
L4G 6J1
(905) 726-4700
aurora.ca

Town of Aurora

Fee Calculation Worksheet

Planning and Development Services

Committee of Adjustment Applications

This Form must be completed by the Applicant for the calculation of fees.

Breakdown of Fees		
Calculations	Fee	Total
Consent		
a) Base Fee (for all Consent types) Plus: Fee per additional lot created (beyond the initial severed parcel)	\$ 5,777.00 \$ 2,902.00	\$ _____ \$ _____
b) Change of conditions <small>(Section 53(23) of the Planning Act—only before final consent is given)</small>	\$ 1,064.00	\$ _____
c) Re-circulation Fee <small>(Note 7)</small>	\$ 3,026.00	\$ _____
Total Consent Application Fee		\$ _____
Minor Variance or Permission		
a) Oak Ridges Moraine Residential	\$ 2,666.00	\$ _____
b) Ground related Residential zoned lands	\$ 3,191.00	\$ _____
c) More than one Variance related to a Draft Approved Plan of Subdivision <small>(plus per lot or unit calculation per the below)</small>	\$ 3,191.00	\$ _____
d) Additional Fee Per Lot / Unit	\$ 1,672.00	\$ _____
e) All other uses, including ICI	\$ 3,910.00	\$ _____
f) Minor Variance for Outdoor Swim Schools	\$ 278.00	\$ _____
g) Minor Variance (non-owner occupied)	\$ 5,092.00	\$ _____
h) Re-circulation / Revisions Fee <small>(Note 7)</small>	\$ 1,605.00	\$ _____
Note 7: Recirculation Fees: Required due to an Owner's or Applicant's revisions or deferrals.		
Total Minor Variance Application Fee		\$ _____
Total Fee Amounts		\$ _____
Payment of Fees		
All fees set out herein shall be payable by cheque to the Town of Aurora upon the submission of this application. For the Application to be complete, the required Application Fee must be paid in full and delivered to the Town before any processing of the Application commences.		
Staff use only		
File Name: _____	File Number: _____	
Property Address / Legal Description: _____		
Committee of Adjustment General Ledger Number		
1-10-1093-52107-000000-000-000-0000 (COAAP)		
Verification of Fees: Indicate Correct Total		\$ _____
Staff Name: _____	Date: _____	