

IT IS THE RESPONSIBILITY OF THE OWNER OR AUTHORIZED AGENT TO PROVIDE COMPLETE AND ACCURATE INFORMATION AT ALL TIMES.

THIS FORM WILL NOT BE ACCEPTED AS AN APPLICATION UNTIL SUCH TIME AS ALL QUESTIONS HAVE BEEN ANSWERED AND ALL REQUIREMENTS HAVE BEEN MET IN THE MANNER REQUESTED HEREIN. PLEASE READ THE FOLLOWING CAREFULLY.

COMMITTEE OF ADJUSTMENT SUBMISSION STANDARDS

Submit new applications to committeeofadjustment@burlington.ca. Please ensure the subject line reads “**New Change of Conditions_Applicant Name_Property Address.**” Follow the instructions below to make a proper submission. Please refer to our webpage for meeting information at www.burlington.ca/coa.

MATERIALS REQUIRED*

Please ensure the following material is included with your submission. All drawings must be true to scale, in metric and legible:

- One (1) complete application form, in PDF format; All fields must be completed.
- Attach any original signed and completed studies, correspondence and/or permits from other agencies that are relevant to your application.

*Additional information may be requested to assist staff with processing your application.



**PLANNING ACT, R.S.O. 1990, C.P. 13
APPLICATION FOR CHANGE OF CONDITION**

THE UNDERSIGNED HEREBY APPLIES TO THE COMMITTEE OF ADJUSTMENT FOR THE CITY OF BURLINGTON UNDER SECTION 53 OF THE PLANNING ACT, R.S.O. 1990, C.P.13, AS DESCRIBED IN THIS APPLICATION, FROM BY-LAW NO. 2020. (AS AMENDED)

APPLICANT TO COMPLETE ALL SECTIONS BELOW

PART 1 – OWNER INFORMATION

OWNER(S) INFORMATION:

Legal Name (as it appears on the title for the property):

Mailing Address: _____ City: _____

Postal Code: _____ Home Phone: _____ Mobile Phone: _____

Work Phone: _____ E-Mail: _____

AGENT INFORMATION (if applicable): (This person will be the primary point of contact)

Name:

Business Address: _____ City: _____

Postal Code: _____ Home Phone: _____ Mobile Phone: _____

Work Phone: _____ E-Mail: _____

SOLICITOR INFORMATION (if applicable):

Name:

Business Address: _____ City: _____

Postal Code: _____ Home Phone: _____ Mobile Phone: _____

Work Phone: _____ E-Mail: _____

PART 2 – LOCATION OF SUBJECT PROPERTY

PROPERTY INFORMATION

Municipal Address(es) of property:

Legal Description of property:

Assessment Roll Number: _____ City Official Plan Designation: _____

Regional Official Plan Designation: _____

Are there any easements or restrictive covenants affecting the subject land(s)? Y N

if **Yes**, please provide a copy of such documents and provide a brief description of its effect:

PART 3 – DESCRIPTION OF REQUEST:

1. Number assigned to the condition(s) for which you are requesting a change: _____

2. Give detailed reason(s) for the requested change(s):

Note: A Change of Condition application must be filed in sufficient time to allow the change of condition(s) to be considered by the Committee of Adjustment and the normal appeal process to expire, prior to the two year deadline to fulfill conditions of the original consent.

PART 4 – CURRENT APPLICATIONS

1) Is the subject land currently the subject of a proposed Regional or Local Official Plan Amendment, or an NEC or Parkway Belt Amendment? Yes No

If YES, and if known, please provide the file number(s) and the file status

File #: _____ File Status: _____

2) Is the subject land currently the subject of an application for Zoning Bylaw Amendment, Ministers Zoning Order, Minor Variance, Consent, or approval of a Plan of Subdivision?

Yes No

If Yes, and if known, please provide file numbers(s) and the file status and explain the file details:

File #: _____ File Status: _____

PART 5 – OTHER INFORMATION

Is there any other information that you think may be useful to the City or other agencies in reviewing this application. If so, please explain below. Attach a separate sheet if more room is required.

OWNERS AUTHORIZATION

If using an agent, the owner must also complete the following form:

I, _____ being the registered owner of the subject lands, hereby
(print name)

Authorize _____ to prepare, submit and act on my behalf with respect to this
(print agent name)

application for a Consent.

Signature of Owner

Date (mmm/dd/yyyy)

Notice of collection of personal information

Personal information contained on this form is collected under the authority of the Planning Act, RSO 1990, c. P.13, to process applications and make decisions. Applications made under the Planning Act, are considered part of the public record and shall be made available to the public. Questions about this collection can be directed to the Manager of Development Planning, City of Burlington, 426 Brant Street, Burlington, Ontario, L7R 3Z6, 905-335-7600.

The applicant acknowledges that an application, all supporting information and materials, including studies and drawings, submitted under the Planning Act, pursuant to s. 1.0.1 of the Planning Act, RSO 1990, c.P.13, as amended, shall be made available to the public.