Application for Change of Condition – 2026
Committee of Adjustment
Department of Community Planning
426 Brant Street, Burlington ON
committeeofadjustment@burlington.ca

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.

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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):

_____
_____
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_____

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.

_____
_____
_____
_____
_____
_____
_____
_____
_____

AFFIDAVIT

*Please fill out at time of submission of application

I have the authority to bind the Corporation (check if applicable) ☐ Signature of Applicant or Authorized

Agent: _____

I, _____(print name) of the _____ (Region/City/County) of _____ in the _____ (City/Town/Township)

of _____ solemnly declare that all the statements contained in this application are true and I make this solemn declaration conscientiously believing it to be true and knowing 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 the_____ (Region/City/County) of_____ in the _____ (City/Town/Township)

this _____day of_____ 20_____.

_____ Signature of Commissioner, etc.

_____ Signature of Applicant or Authorized Agent

PERMISSION TO ENTER

IMPORTANT This MUST be completed for all applications and signed by the OWNER.

Municipal Address of Subject Lands: _____

I hereby authorize the Committee of Adjustment members, City of Burlington and Region of Halton staff to enter onto the above-noted property for the limited purposes of evaluating the merits of this application.

_____ Signature of Owner/Applicant

_____ Print Name

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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.