

Pre-Consultation Submission Requirements & Request Form

Important: Please check all applicable boxes and submit with your application. Keep copies for your files.

FOR OFFICE USE ONLY
Date Received: Received by:
SECTION 1 – Property Information:
Site Address:
Roll #:
SECTION 2 – Owner Information:
Registered Owner Name:
Address: Postal Code:
Preferred Phone Number:
Email Address:
□ Owner's Authorization Letter Attached (must be attached if the applicant is not the owner)
SECTION 3 – Applicant Information:
Name of Applicant (if different from owner):
Address: Postal Code:
Preferred Phone Number:
Email Address:

Have you had any previous discussions with Planning staff with respected tot his proposal?	
Yes 🗆 No	
yes, with who have you consulted?	
las this land been the subject of any other application under the Planning Act within the last five years? If yes, lease list the type of application and file number, if known:	
SECTION 4 – Proposal:	
ummary of Proposal:	

Please attach separate sheets/forms/sketches if more space is needed

SECTION 5 – Site Plan Submission Items (check all that apply):		
provided.		
	ore detailed feedback the development team will be able to be submitted in metric units.	
 □ Scale (metric) □ Project name and municipal address □ Contact Information □ Location (adjacent streets/mail intersection) 	 □ Proposed servicing details – sanitary, water and storm □ Parking areas and number of spaces □ Zoning standards matrix: 	
 □ Lot lines and dimension □ Proposed use(s) □ All proposed buildings and structures □ Loading spaces □ Number of units/storeys □ Natural features affecting the sit □ Landscape areas and proposed features □ Proposed access/driveways/roads 	 Lot area Setbacks to all lot lines (based on survey) Lot coverage Gross floor area of each use Height of building Parking and loading spaces 	