



**Application for Zoning By-law Amendment**  
(Section 34 of the Planning Act)  
**and/or Local Official Plan Amendment**  
(Section 22 of the Planning Act)  
(Revised April 6, 2023)

**Instructions:**

Prior to submitting an application, a proponent must complete a pre-consultation with Planning staff to determine the appropriateness of the request and review submission requirements. Each application must be submitted with the application; all recommended supporting documents, and; a drawing of the proposal.

If the Applicant is not the owner of the subject land, a written statement by the owner which authorizes the Applicant/Agent to act on their behalf as it relates to the subject application must accompany the application (See Section 15.0).

In accordance with Sections 22(5) and/or 34(10.2) of the Planning Act, RSO 1990, additional information and studies may be required by the Municipality to evaluate the proposed Amendment. Requirements for additional information are identified in the County of Perth Official Plan and/or the Mitchell Ward Official Plan. The type and scope of studies that are required will be determined through pre-consultation with Municipality of West Perth staff. If the required additional information is not provided, the application cannot be deemed to be complete and will not be processed.

In accordance with the Clean Water Act (2006), several Municipal Drinking Water Source Protection Plans ("SPPs") have been developed within the Municipality of West Perth. It is the responsibility of the Applicant to confirm the applicability of such SPPs as part of this application.

**Application Checklist:**

- One Copy of Completed Application Form
- Application drawing (See Section 14.0)
- Application fee payable to the Municipality of West Perth

**For Help:** For general assistance completing this form, please contact:

- Diane Chaffe, Development Coordinator, at (519) 348-8429 Ext. 230 or [dchaffe@westperth.com](mailto:dchaffe@westperth.com); or,
- the Perth County Senior Planner, Susanna Reid MCIP, RPP, [sreid@perthcounty.ca](mailto:sreid@perthcounty.ca)

Detailed digital mapping resources for your property is available [here](#).

The County and Mitchell Ward Official Plans can be found [for the Perth County Official Plan](#), or [Mitchell Official Plan here](#).

West Perth planning documents can be found [here](#).

**Application for Local Official Plan/  
Zoning By-law Amendment**

**Municipality of West Perth**  
Application #:

<b>FOR OFFICE USE ONLY</b>		Date Received:	
Pre Con: <input type="checkbox"/> Yes <input type="checkbox"/> No		Roll: 3130 - _____ - _____ - _____ - _____	
Fee Paid:		Fee Received Date:	
<input type="checkbox"/> ZBA <input type="checkbox"/> OPA		<input type="checkbox"/> New Site Plan <input type="checkbox"/> Site Plan Amendment	
<b>1.0 Applicant Information</b>			
<b>Owner(s)</b>		<b>Correspondence to be sent: <input type="checkbox"/> Yes <input type="checkbox"/> No</b>	
Name:			
Address:			
Cell Phone (1):		Cell Phone (2):	
Email(s):			
<b>Applicant (if Applicant is not the owner)</b>		<b>Correspondence to be sent: <input type="checkbox"/> Yes <input type="checkbox"/> No</b>	
Name:			
Address:			
Cell Phone (1):		Cell Phone (2):	
Email(s):			
<b>Agent (If applicable)</b>		<b>Correspondence to be sent: <input type="checkbox"/> Yes <input type="checkbox"/> No</b>	
Name:			
Address:			
Cell Phone (1):		Office Phone:	
Email(s):			

**Application for Local Official Plan/  
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Application #:

<b>2.0 Location and Size of the Subject Land</b>					
Local Municipality: West Perth			Ward:		
Concession:	Lot:		Reg. Plan:	Lot/Block:	
Ref. Plan:	Part:		Street Address:		
Lot Frontage (m):			Lot Area (m <sup>2</sup> or ha):		
<b>2.1 Name and address of mortgages or charges: (if applicable)</b>					
<b>2.2 Description of any easements or covenants and their effects: (if applicable)</b>					
<b>2.3 Date the subject lands were acquired by the current owner:</b>					
<b>3.0 Current and Proposed Land Use</b>					
Current Use:					
Proposed Use:					
<b>4.0 Status</b>					
County Official Plan Designation(s):					
Mitchell Ward Official Plan Designation(s):					
Current Zone(s):					
<b>5.0 Site Information</b>					
	Existing Buildings	Proposed Buildings		Existing Buildings	Proposed Buildings
Front Yard:	m	m	Height	m	m
Rear Yard:	m	m	Dimensions:	m x m	m x m
Side Yard:	m	m	Date Built:		
Side Yard:	m	m	<input type="checkbox"/> See attached drawing		
Other Information (if necessary):					

**Application for Local Official Plan/  
Zoning By-law Amendment**

**Municipality of West Perth**  
Application #:

<b>6.0 Official Plan Amendment (proceed to Section 7.0 if an OPA is not proposed)</b>		
<b>6.1 Does the Proposed Official Plan Amendment:</b>		
Add a land use designation to the Official Plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Change a land use designation to the Official Plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Replace a policy in the Official Plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Delete a policy from the Official Plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Add a policy to the Official Plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Add a land use designation to the Official Plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>6.2 If applicable, please provide the policy section number to be changed and the suggested policy wording on a separate page.</b>		
<b>6.3 What is the purpose of the Official Plan Amendment and land uses that would be permitted by the proposed Official Plan Amendment?</b>		
<b>7.0 Zoning By-Law Amendment (proceed to Section 8.0 if a ZBA is not proposed)</b>		
<b>7.1 Does the Proposed Zoning By-law Amendment:</b>		
Add a Zone Category to the Zoning By-law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Change a Zone Category of the Zoning By-law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Replace a zoning provision of the Zoning By-law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Delete a zoning provision of the Zoning By-law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Add a zoning provision to the Zoning By-law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>7.2 If applicable, please provide the section number to be changed and the suggested wording on a separate page.</b>		
<b>7.3 What is the purpose of the Zoning By-law Amendment and what are the land uses proposed? (attach a separate page if necessary)</b>		

**Application for Local Official Plan/  
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<b>8.0 Previous Industrial or Commercial Uses</b>					
8.1 Has there previously been an industrial or commercial use on the subject land or adjacent land?					
8.1.2 If Yes, please specify the uses and dates:					
8.2 Is there reason to believe the subject land may have been contaminated by former uses on or near the site? <input type="checkbox"/> Yes <input type="checkbox"/> No					
What information did you use to determine the answers to the above questions?					
If Yes to (8.1) or (8.2), a previous use inventory showing all former uses of the subject land, or if appropriate, the adjacent land is needed. This study must be prepared by a qualified consultant.					
Is the previous use inventory attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A					
<b>9.0 Status of Other Applications under the Planning Act</b>					
Is the subject land also the subject of an application for:					
Consent	<input type="checkbox"/> Yes    File #:		<input type="checkbox"/> No		
Plan of Subdivision/ Condominium	<input type="checkbox"/> Yes    File #:		<input type="checkbox"/> No		
Minor Variance	<input type="checkbox"/> Yes    File #:		<input type="checkbox"/> No		
Site Plan	<input type="checkbox"/> Yes    File #:		<input type="checkbox"/> No		
<b>10.0 Servicing</b>					
10.1 Indicate the existing/proposed sewage disposal type:					
	Existing	Proposed		Existing	Proposed
Public sewage system:	<input type="checkbox"/>	<input type="checkbox"/>	Individual septic system(s):	<input type="checkbox"/>	<input type="checkbox"/>
Public or private communal system:	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
10.2 Indicate the existing/proposed water supply type:					
	Existing	Proposed		Existing	Proposed
Public piped water system:	<input type="checkbox"/>	<input type="checkbox"/>	Individual water system(s):	<input type="checkbox"/>	<input type="checkbox"/>
Public or private communal well(s):	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
10.3 Indicate the existing/proposed storm drainage type:					
	Existing	Proposed		Existing	Proposed
Storm sewer	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
Ditches or swales	<input type="checkbox"/>	<input type="checkbox"/>			
10.4 Indicate the existing/proposed road access type:					
	Existing	Proposed		Existing	Proposed
Provincial Highway	<input type="checkbox"/>	<input type="checkbox"/>	Public road, seasonal	<input type="checkbox"/>	<input type="checkbox"/>
Public road, full maintenance	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>

**11.0 Justification**

Explain how the application is consistent with the Provincial Policy Statement (2014).

**12.0 Well head Protection Area (WHPA)**

Is any part of the subject lands within a WHPA?  Yes  No

**13.0 Other Information**

**14.0 Application Drawing**

Please submit an accurate, scaled drawing of the proposal showing:

- a) The subject land including its boundaries and dimensions, and the location and nature of any easement or restrictive covenants which affect the subject land;
- b) The uses of adjacent and abutting land;
- c) The location of all existing as well as proposed buildings and their dimensions, uses, and setbacks from lot lines;
- d) The location of all natural and man-made features on the land and the location of these features on adjacent and abutting lands; and
- e) Scale and North Arrow

**15.0 Authorization of Owner for Agent to Make the Application**

I/We, \_\_\_\_\_ of the

\_\_\_\_\_ in the County/Region of \_\_\_\_\_

Am/are the owner(s) of the land that is the subject of this application and I/We hereby authorize

\_\_\_\_\_ to act as my/our agent in the application.

\_\_\_\_\_  
Name of Owner

\_\_\_\_\_  
Signature  
Date:

\_\_\_\_\_  
Name of Owner

\_\_\_\_\_  
Signature  
Date:

\_\_\_\_\_  
Name of Owner

\_\_\_\_\_  
Signature  
Date:

**16.0 Acknowledgement**

By filing this application, the Applicant is aware of and agrees that they will be solely responsible for and pay for any third-party expenses incurred by the Municipality associated with the application including but not limited to third-party professional services or any legal costs related to an appeal.

Dated at the \_\_\_\_\_ in the County/Region of \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Signature

**17.0 Consent to Use and Disclose Personal Information**

I/We acknowledge that all information provided on this form (name, address, phone number, e-mail address, etc.), including supporting documentation, is collected under the authority of the Planning Act, and will be accessible to the public and governmental and technical agencies for review. The owner(s)/applicant(s)/authorized agent authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected under the authority of the Planning Act for the purposes of processing this application.

Furthermore, I/We hereby authorize Council members and members of the staff of the Corporation of the Municipality of West Perth and/or technical review agencies to enter upon the subject lands for the purpose of evaluating the merits of the subject application and conduct any inspections on the subject land that may be required to perform this duty.

\_\_\_\_\_  
Signature(s)

**18.0 Owner/ Applicant Affidavit or Sworn Declaration**

I/We, \_\_\_\_\_ of the \_\_\_\_\_

In the County/Region of \_\_\_\_\_ make oath and say  
(or solemnly declare) that the information contained in the documents that accompany this  
application is true. Sworn (or declared) before me at the

\_\_\_\_\_ in the County/Region of \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Commissioner of Oaths

\_\_\_\_\_  
Owner / Applicant

\_\_\_\_\_  
Owner / Applicant

**19.0 Other Information (use this page if additional space is needed to provide information)**