



PLANNING ACT APPLICATION PRE-CONSULTATION GUIDE

NOTICE:

It is recommended for Applicants to consult with the Town before submitting a development application for the following types of applications:

- Official Plan Amendment
- Plan of Subdivision/Condominium
- Site Plan Control
- Zoning By-Law Amendment

PRE-CONSULTATION PROCEDURE:

It is recommended that applicants meet with Town Staff prior to the submission of the above noted *Planning Act* applications. Pre-consultation meetings are hosted by the Development Planning Division and may include representatives from various other Town departments and external agencies involved in the evaluation of planning applications. The pre-consultation meeting allows the applicant and/or their representative(s) to present and discuss the development proposal with relevant staff, and also provides staff with the opportunity to clarify the application process, provide preliminary comments about a development proposal, identify key issues and the approvals that will be required, and confirm the supporting information/materials (e.g. drawings, reports and studies, etc.) that must be submitted with the planning application(s), in accordance with the Policies of the Georgina Official Plan / Secondary Plans; and Pre-Consultation By-law 2009-0072 (PL-2) in order to be considered a COMPLETE APPLICATION under the Planning Act.

FEE:

Please refer to the current Planning Fee by-law

LSRCA FEE – fee for review of pre-consultation circulations provided to the Lake Simcoe Region Conservation Authority by Partner Municipalities. Please refer to the current [LSRCA Fee Schedule](#) for the current fee amount.

LSRCA Payment Instructions:

- By cheque - please mail your payment to 120 Bayview Parkway, Newmarket ON L3Y 3W3, Attention "Planning Department". Cheques should be made payable to the 'Lake Simcoe Region Conservation Authority'.
- By credit card – please call 905-895-1281, ext. "609". LSRCA staff will be able to assist you. Be sure to have the municipal address, the fee amount, a file reference number or invoice # (if applicable) related to your planning application to ensure that your payment is processed in a timely manner.
- Electronic Funds Transfer (Direct Deposit) - Please forward EFT enrollment forms / request to Finance@LSRCA.on.ca. Our staff will complete the form and return to you so that the transfer may occur.

Please reference the municipal address related to the application, the municipal file number and/or the LSRCA file number or invoice number, if applicable.

SUBMISSION REQUIREMENTS:

Prior to meeting with Town staff, the applicant must submit a completed “Pre-Consultation Request” form, and provide one (1) copy of an 11” x 17” size drawing, which illustrates the following:

- location of property and immediate surroundings, including property dimensions (all measurements to be in metric; drawn to scale; use of colour, hatching or labels can help illustrate the property as existing and proposed)
- use of adjoining lands
- location of existing and proposed buildings, structures and features, including:
 - pedestrian and vehicular access (including adjacent accesses and intersections)
 - parking and circulation
 - location/width/names of all road allowances, rights-of-way, streets or highways
 - restrictive covenants or easements affecting the subject land
 - landscaped / treed areas; watercourses; drainage ditches, slopes and natural features (and location of any of these features on adjacent lands which may affect the application)
 - services and utilities (including location of connections at property line); or well and septic system, if applicable
 - Other relevant information, as appropriate to assist staff in understanding the proposal

TIMING & REQUIRED INFORMATION:

Complete and return the Pre-Consultation Request and the supporting submission material to the Development Planning Division at the address noted below, or by email to planning@georgina.ca .

Upon receipt of a completed Pre-Consultation Request form and all required/supplementary information, Town staff will schedule a pre-consultation meeting between the applicant/agent and relevant Town/agency staff. Town staff will ensure that the appropriate agencies and/or staff are invited to the pre-consultation meeting. Your submission will allow staff/agencies the opportunity to prepare for and gather any information necessary to properly consider the proposal in the context of local, regional, provincial and agency policies, guidelines and professional opinions, and make appropriate recommendations at the pre-consultation meeting.

Shortly following the pre-consultation meeting, staff will provide the applicant or their agent with a completed “Pre-Consultation Checklist”. The written comments will indicate the submission requirements which are necessary to process the identified necessary planning application(s). The supporting information and materials will be required to be submitted with the planning applications(s) to be considered a COMPLETE APPLICATION under the Planning Act.

CONTACT INFORMATION:

To discuss the proposal prior to a formal pre-consultation meeting, please contact the appropriate department:

- (i) Site Plan Control applications - Development Services, Development Engineering Division, Ext. 2329 or building2@georgina.ca
- (ii) Zoning By-law Amendment, Official Plan Amendment, Subdivision/Condominium applications - Development Services, Development Planning Division, Ext. 3008 or planning@georgina.ca



PLANNING ACT APPLICATION

PRE-CONSULTATION REQUEST

The personal information collected on this form is collected under the authority of the Planning Act, RSO 1990, c.P.13 and will be used only to process this form. Questions about the collection of personal information should be directed to the Town of Georgina Clerk's Department.

Communication should be sent to: **Applicant** **Owner** **Agent**
 (please check appropriate box)

1. APPLICANT INFORMATION:

Surname		First Name		
Name:				
Street Number		Street Name		Unit Number
Address:				
Municipality:		Province:	Postal Code:	
Phone:	Fax:		Email:	

2. OWNER INFORMATION (if different from applicant):

Surname		First Name		
Registered Land Owner:				
Street Number		Street Name		Unit Number
Address:				
Municipality:		Province:	Postal Code:	
Phone:	Fax:		Email:	

3. AGENT INFORMATION:

Firm Name:				
Surname		First Name		Position
Contact Name:				
Street Number		Street Name		Unit Number
Address:				
Municipality:		Province:	Postal Code:	
Phone:	Fax:		Email:	

4. DESCRIPTION OF SUBJECT LAND *(complete the applicable lines):*

Street Number	Street Name	Unit Number
Site Address:		
Registered Plan Number:	Lot/Block Numbers:	
Assessment Roll Number: (if known)	Conc. & Lot Number:	
Reference Plan Number:	Part Numbers:	

5. PROPERTY INFORMATION:

(i) **Describe the Current Land Uses on the Property:**

(ii) **Current Zoning:** _____

Does the proposed use comply with the existing zoning / provisions? Yes No

If "No", explain amendment(s) needed: _____

(iii) **Current Official Plan/Secondary Plan Designation:** _____

Does the proposed use conform to the existing land use designation / policies? Yes No

If "No", explain amendment(s) needed: _____

(iv) **Lot Area:** _____ (sq m or ha) **Lot Frontage:** _____ (m)

(v) **Are there any encumbrances on the property?** Yes No
(e.g. easements, encroachments, etc.)

If “Yes”, please list encumbrances: _____

(vi) **Describe the current buildings or structures on the property, and the natural features and vegetation on the property and adjoining the property:** (Should further space be required for responses, or to provide additional information to assist staff in considering the proposal, please provide by attachment.)

(vi) **Provide a detailed description of the proposed development:** (Should further space be required for responses, or to provide additional information to assist staff in considering the proposal, please provide by attachment.)

6. OWNER'S AUTHORIZATION:

I/We, _____ being the **registered owner(s)** of the subject lands, hereby authorize (*print name of agent*), _____ to submit the above pre-consultation request form to the Town of Georgina and to appear on my/our behalf at any meetings with respect to this matter and to provide any information required by the Town relevant to this application.

Date: _____

OWNER(S) SIGNATURE

Please print and sign name(s) _____ / _____
Signature Print

Signature Print

Note: Original signature(s) are required for the record. In the case of a corporation, the signature(s) must be that of an officer(s) with authority to bind the corporation.

7. CONSENT FOR RELEASE OF INFORMATION:

In accordance with the provisions of the Planning Act, RSO 1990, c.P13, as amended, I understand that all information and material that is submitted with any application shall be made available to the public. In submitting this application and any supporting materials or information, I hereby acknowledge the above-noted and provide my consent in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, RSO 1990, c.M56, as amended, that all information, documents, drawings and plans provided with this application by myself, my agents, consultants and solicitors, will be part of the public record and will also be made available to the general public.

Date: _____

OWNER(S) SIGNATURE

Please print and sign name(s) _____ / _____
Signature Print

Signature Print

Note: Original signature(s) are required for the record. In the case of a corporation, the signature(s) must be that of an officer(s) with authority to bind the corporation.

8. PERMISSION TO ENTER

The applicant acknowledges that a site walk may be required in order to view the property and its relation to the surrounding lands, and in this regard authorizes members of Council (or a representative thereof), Town staff, Peer Review Consultants retained by the Town, and relevant External Agency Review Staff to enter onto the subject property for the purpose of evaluating the merits of the application.

Date: _____

OWNER(S) / AGENT(S) SIGNATURE

Please print and sign name(s) _____ / _____
 Signature Print
 _____ / _____
 Signature Print

Note: Original signature(s) are required for the record. In the case of a corporation, the signature(s) must be that of an officer(s) with authority to bind the corporation.

9. SUBMISSION CHECKLIST

- 1) The “Pre-Consultation Guide” has been read by the applicant/owner/agent Yes ____ No ____
- 2) One (1) print copy of an 11” x 17” size drawing **drawn to scale** illustrating **all** items as noted on the Pre-Consultation Guide have been submitted. Yes ____ No ____
**Note: If submitting drawings larger than 11”x17”, please submit ten (10) copies* Yes ____ No ____
And Where Possible One (1) electronic copy in PDF format has been submitted. Yes ____ No ____
- 3) One (1) print copy of additional information/material have been submitted (*if applicable*) Yes ____ No ____
And Where Possible One (1) electronic copy in PDF format has been submitted Yes ____ No ____

Completed by: _____ Date _____
 Applicant/Agent/Owner

THIS SECTION IS FOR OFFICE USE ONLY

10. CONTEMPLATED APPLICATION TYPE

Official Plan Amendment Plan of Subdivision / Condominium Zoning By-law Amendment	Date Received _____ Staff Contact _____ Phone/Ext. No. _____ Pre-Cons. File No. _____
Site Plan Control	

