

FILE NO. \_\_\_\_\_

REC'D: \_\_\_\_\_

DATE APPLICATION CONSIDERED

COMPLETE: \_\_\_\_\_

**TOWN OF TILLSONBURG  
SITE PLAN APPROVAL APPLICATION FORM**

The undersigned hereby request the Town of Tillsonburg to consider a Site Plan Control application pursuant to Section 41 of the Planning Act on the lands hereinafter described.

**1. BACKGROUND INFORMATION**

a) Applicant's Name \_\_\_\_\_

Applicant's Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

b) Registered Owner (if other than applicant)

\_\_\_\_\_

Owner's Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

c) Location of Subject Land

Lot Number(s) \_\_\_\_\_ Plan No. or Concession \_\_\_\_\_

Part Number(s) \_\_\_\_\_ Reference Plan \_\_\_\_\_

Street Address (if any) \_\_\_\_\_

The subject land is located on the \_\_\_\_\_ side of the street lying  
between \_\_\_\_\_ Street and \_\_\_\_\_ Street.

P.I.N. \_\_\_\_\_

1. **BACKGROUND INFORMATION - (cont'd)**

d) Existing use of Subject property

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e) Specific indication of proposed uses of land and buildings

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f) Official Plan Designation (where applicable)

Schedule T-1 - Land Use Plan \_\_\_\_\_

Schedule T-2 - Residential Density Plan \_\_\_\_\_

g) Zoning By-law - Existing Zoning \_\_\_\_\_

- Requested Zoning \_\_\_\_\_

2. **SITE INFORMATION**

a) Zoning Provisions

REQUIRED  
by Zoning By-law 81-1994  
as amended

PROPOSED

Lot Frontage \_\_\_\_\_

Lot Depth \_\_\_\_\_

Lot Area \_\_\_\_\_

Lot Coverage \_\_\_\_\_

Front Yard \_\_\_\_\_

Rear Yard \_\_\_\_\_

Interior Side Yard \_\_\_\_\_

Exterior Side Yard (corner lot) \_\_\_\_\_

Landscaped Open Space (%) \_\_\_\_\_

No. of Parking Spaces \_\_\_\_\_

No. of Loading Spaces \_\_\_\_\_

Width of Planting Strip \_\_\_\_\_

Driveway Width \_\_\_\_\_

Handicap Spaces \_\_\_\_\_

Other (Specify) \_\_\_\_\_

**2. SITE INFORMATION - (cont'd)**

a) Zoning Provisions - (cont'd)

Off-Street Parking and Loading Facilities

Total number of off-street parking spaces existing \_\_\_\_\_  
Number of off-street parking spaces proposed \_\_\_\_\_  
(include existing & proposed)  
Number of off-street loading facilities existing \_\_\_\_\_  
Number of off-street loading facilities proposed \_\_\_\_\_  
(include existing & proposed)

b) Proposed Building Size:

Ground Floor Area of Existing Buildings(s) \_\_\_\_\_  
Ground Floor Area of Proposed Development \_\_\_\_\_  
Total Ground Floor Area (including existing & proposed) \_\_\_\_\_  
Number of Storeys proposed \_\_\_\_\_  
Building Height Proposed \_\_\_\_\_  
Total Gross Floor Area Proposed (including existing and proposed) \_\_\_\_\_

**3. COMPLETE AS APPLICABLE:**

a) MULTIPLE FAMILY RESIDENTIAL

Landscaped Area \_\_\_\_\_ sq m  
Conversion or Addition to Existing Residential Buildings Yes \_\_\_\_\_ No \_\_\_\_\_  
Amenity and/or Children's Play Area Yes \_\_\_\_\_ No \_\_\_\_\_

*UNIT BREAKDOWN*

<i>Type</i>	<i>Number of Units</i>	<i>Floor area of Unit Type</i>
Bachelor	_____	_____
One-Bedroom	_____	_____
Two-Bedroom	_____	_____
Three-Bedroom	_____	_____

**3. COMPLETE AS APPLICABLE: - (cont'd)**

**a) MULTIPLE FAMILY RESIDENTIAL - (cont'd)**

Other Facilities provided (eg. play facilities, underground parking, games rooms, swimming pool, etc.)

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**b) COMMERCIAL/INDUSTRIAL USES**

No. of Buildings Proposed \_\_\_\_\_

Conversion or Addition to Existing Building Yes \_\_\_\_\_ No \_\_\_\_\_

Describe

Gross Floor Area (breakdown by type of use, eg. - office area, retail, storage, manufacturing area, etc.) \_\_\_\_\_

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Seating Capacity (for rest. or assembly hall, etc.) \_\_\_\_\_

Describe Type of Business Proposed \_\_\_\_\_

No. of Staff Proposed - Initially \_\_\_\_\_ In future (5 yrs) \_\_\_\_\_

Open Storage Required Yes \_\_\_\_\_ No \_\_\_\_\_

Describe type, location, and buffering (if any) \_\_\_\_\_

Phasing if any \_\_\_\_\_

If residential use proposed as part of, or accessory to commercial/industrial use, please complete Sec. 3a also

**c) INSTITUTIONAL, OPEN SPACE OR OTHER USES**

Describe Type of Use Proposed \_\_\_\_\_

No. of Beds (if applicable) \_\_\_\_\_

Gross Floor Area by Type of Use  
(eg. office, common rooms, storage, etc.) \_\_\_\_\_

Landscaped Area \_\_\_\_\_ sq m

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_

\_\_\_\_\_  
Signature of Applicant

I, \_\_\_\_\_ of the \_\_\_\_\_ of  
\_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_.

**DO SOLEMNLY DECLARE THAT:**

All of the statements contained in this application are true and I make this solemn declaration conscientiously believing it to be true and knowing that 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 \_\_\_\_\_

of \_\_\_\_\_ in the \_\_\_\_\_

of \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_

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

\_\_\_\_\_  
A Commissioner, Etc.