

## APPLICATION TO REGISTER AN ACCESSORY DWELLING UNIT

Proponents are encouraged to consult with the Office of Community Planning prior to submitting an application.

Please complete all applicable sections of the application form. An incomplete application will be returned to the applicant. For assistance, please contact the Office of Community Planning at 905-778-2055, ext. 1400.

*All personal information on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and the Planning Act, R.S.O. 1990, c. P.13, as amended, and will be used for the purposes of reviewing this application only. Questions regarding this collection may be directed to the Manager of Community Planning, 305 Barrie Street, Unit 2, P.O. Box 419, Bradford, Ontario, L3Z 2A9, Telephone: 905-778-2055, ext. 1401, Fax: 905-778-2070.*

APPLICATION TYPE (check one)			
<input type="checkbox"/> Register an existing accessory dwelling unit in existence prior to July 14, 1994	<input type="checkbox"/> Register an existing accessory dwelling unit in existence after July 14, 1994	<input type="checkbox"/> Register new/proposed accessory dwelling unit	
PROPERTY INFORMATION			
Municipal Address:	Street No.	Street Name	Unit No.
Registered Plan No.:		Lot/Block No(s).:	
Reference Plan No.:		Part No(s).:	
Roll No.:		Lot & Concession No.:	
Date Subject Land Was Acquired By Current Owner (if known):			
OWNER/APPLICANT INFORMATION			
Property Owner Information (check one):		<input type="checkbox"/> Person(s) <input type="checkbox"/> Company	
Registered Land Owner:	Surname	First Name	
Name:	Company Name	Company Officer	Officer's Title
Application Contact:	Surname	First Name	Position

Address:	Street No.	Street Name		Unit
Municipality :			Province:	Postal Code:
Telephone No.:			Fax No.:	Email:

**OFFICIAL PLAN/ZONING BY-LAW INFORMATION**

Official Plan designation:	
Zoning:	

**SITE DESCRIPTION (metric)**

	Frontage	Depth	Area
Subject Lands:			

**MUNICIPAL SERVICES (check as applicable)**

Water:	<input type="checkbox"/> Municipal	<input type="checkbox"/> Well	<input type="checkbox"/> Other Explain
Sanitary Sewers:	<input type="checkbox"/> Municipal	<input type="checkbox"/> Septic	<input type="checkbox"/> Other Explain

**DETAILS OF THE DWELLING UNITS**

**Dimensions (in metric) and location of all dwelling units**

Please note that Unit 2 is the accessory dwelling unit. (Attach a separate page if necessary)

Unit	Ground Floor Area	Total Floor Area	Number of Storeys	Location of Dwelling Unit (1 <sup>st</sup> floor, 2 <sup>nd</sup> floor, attic, basement, other – explain)
1				
2				

**Describe the Configuration of the dwelling units**  
(for other, include information on living areas, laundry room, access, etc.)

Unit	Number of Bedrooms	Number of Bathrooms	Number of Kitchens	Other
1				
2				

**Describe Use of Existing Building**

Type of Structure	Dated Constructed	Current Use	Date Use Commenced

**Describe the Proposed Parking Details for all Buildings and Structures Listed Above**

<p>Number of Parking Spaces provided:</p> <p>(minimum parking space dimension is 2.7m x 6.0m)</p> <p>Please be aware parking spaces cannot be located within Municipal right-of-way and must be located within maximum driveway width, private garage, etc.</p> <p>Please see Section 5.15 of the Zoning By-law for clarification.</p>			
Surface of Parking Area:	<input type="checkbox"/> Asphalt	<input type="checkbox"/> Gravel	<input type="checkbox"/> Other <small>Explain</small>

**OWNER'S AUTHORIZATION OF AGENT**

*If an agent is used, the owner must complete this section. If there is more than one owner, a separate authorization from each individual or corporation is required. Attach an additional page(s) in the same format as this authorization if necessary.*

I, \_\_\_\_\_ being the registered owner of the subject lands,

hereby authorize (print name of agent)

to submit the above application to the Town of Bradford West Gwillimbury and to provide any information or material required by the Town relevant to the application. I also agree to allow the Town of Bradford West Gwillimbury, its employees, and/or agents to enter upon the subject property for the purposes of conducting a survey, inspection, and/or tests that may be necessary to this application.

I understand that all the information, documents and drawings and plans provided with this application will be made available to the public, as required by the provisions of the *Planning Act*, R.S.O. 1990, c. P.13, as amended.

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

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

Printed Name of Signatory: \_\_\_\_\_

Title: \_\_\_\_\_

**OWNER'S/AGENT'S SIGNATURE**

I, \_\_\_\_\_ of Town/City of \_\_\_\_\_

in the County/Region of \_\_\_\_\_ solemnly declare that:

All of the above statements and the statements contained in all of the exhibits submitted herewith 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*.

As of the date of this application, I am (*circle one of the following*) the registered *Owner* or the *Agent* for the owner of the lands described in this application, I have examined the contents of this application, I certify as to the correctness of the information submitted with the application insofar as I have knowledge of these facts, and I concur with the submission of this application to the Municipality.

I understand that all the information, documents and drawings and plans provided with this application will be made available to the public, as required by the provisions of the *Planning Act*, R.S.O. 1990, c. P.13, as amended.

Declared before me at the Town/City of \_\_\_\_\_

\_\_\_\_\_ in the County/Region \_\_\_\_\_ )

of \_\_\_\_\_ this \_\_\_\_\_ day \_\_\_\_\_ )

of \_\_\_\_\_ 20 \_\_\_\_\_ )

\_\_\_\_\_ )

\_\_\_\_\_ )

\_\_\_\_\_ )

Signature of Owner/Agent

Signature of Commissioner, Notary Public, etc.

**For BWG Office Use Only**

<i>Date Received:</i>	<i>Fee Received:</i>	<i>Fee Required: \$140.00</i>
<i>Application Received by:</i>		
<i>Outstanding Requirements:</i>		
<i>Date Application Deemed Complete:</i>	<i>Date Dwelling Unit Registered:</i>	
<i>Date Recognition Revoked:</i>	<i>Other:</i>	