



THE CORPORATION OF THE
CITY OF ST. CATHARINES

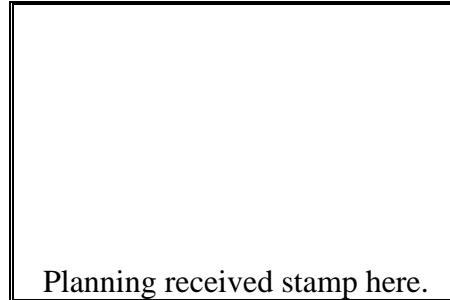
www.stcatharines.ca

PO Box 3012, 50 Church Street
St. Catharines, ON L2R 7C2
Tel : 905.688.5600 | Fax: 905.682.3631
TTY: 905.688.4TTY (4889)

PLANNING SERVICES
Development

SITE PLAN CONTROL DRAWINGS APPLICATION

SITE PLAN AGREEMENT 60.52 _____
AMANDA NO: _____ SC



PREAMBLE

It is the responsibility of the applicant or authorized agent to complete the particulars required hereunder and to supply all of the documents to the Planning Services Department, as well as any additional information requested such as acoustical studies, traffic studies, shadowing diagrams, and environmental impact studies as requested by the Municipality.

1. Twelve copies of a Site Plan based on an actual survey by an Ontario Land Surveyor showing total holdings of the owner(s) indicating the location, size and use of land, buildings or structures on the subject lands, and when applicable, show parking areas, loading spaces and entrances/exits. (Plans to be folded to 8½ x 14" size).
2. Twelve copies of a landscape plan with a landscape schedule and plant material as outlined in the Site Plan Agreement Manual.
3. One (1) copy of the completed application form.
4. Application Fee \$ _____

All information is to be forwarded to the:
Planning Services Department
City of St. Catharines
Box 3012, City Hall
50 Church Street
St. Catharines, ON
Canada L2R 7C2
Phone No. (905) 688-5600 ext. 1719
Fax No. (905) 688-5873

***Applicants should review this application with the
Planning Services Department before submitting***

PLEASE PRINT ALL INFORMATION

1. APPLICANT INFORMATION

REGISTERED OWNER OF PROPERTY: _____

MAILING ADDRESS: _____

CONTACT IF A NUMBERED COMPANY: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

OWNERS AGENT: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

2. PROPERTY LOCATION AND DESCRIPTION

Municipal Address: _____

Legal Description of the lands (Lot and Registered Plan or Concession).

Dimensions of subject property:

i) Lot (Street) frontage _____ feet _____ metres

ii) Depth _____ feet _____ metres

iii) Area _____ feet _____ metres

Present use of land

3. TYPE OF PROPOSED DEVELOPMENT

Be as specific as possible in describing how the land and proposed structure will be used. In the case of a restaurant, please indicate the number of seats proposed. Please advise if the proposed development is to be a condominium development.

4. DETAILS

Total No. of residential units in the plan _____

Type of project: Commercial Residential Industrial Institutional Other

No. of hect of commercial? _____

No. of hect of industrial? _____

No. of hect of Institutional? _____

No. of hect of Residential? _____

**5. AUTHORIZATION FOR AGENT
(Complete only if applicant is not the registered owner.)**

I/We _____

hereby authorize and direct _____

to make this application on the property known municipally as _____

for which I am/we are the registered owner(s).

Signature

Date

6. AFFIDAVIT

I, _____ of the City

of, _____ solemnly declare that:

All 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 _____, 20____)

Signature of Owner or Authorized Agent

A Commissioner etc.