
Planning Services**Community Improvement Plan (2020CIP)****APPLICATION FOR:****ACCESSORY DWELLING UNIT PROGRAM (ADU)**

1. Before applying, it is essential that you read the [Guidelines for the Accessory Dwelling Unit Program \(ADU\)](#). The Program Guidelines contain important information regarding Minimum Application Submission Requirements, Minimum Program Eligibility, Criteria, Process and Timelines.
2. Please ensure that all of the required information and submission materials are provided to ensure it is a Complete Application. Any application which is incomplete will not be processed.
3. Please type or print legibly the requested information on the Application form.

PART A: APPLICATION INFORMATION

1. **Has the Applicant discussed/ reviewed the proposed project with a member of Planning Services staff.**

Staff Member Name _____

Date of Review
(DD/MM/YYYY) _____

2. **Application Type**

Application is being made for the construction of: (check✓ applicable box)

- an (interior) accessory apartment unit within, or as an addition to, an existing principle dwelling unit that is 5 years in age or older
- an (exterior) accessory apartment unit within an existing or new detached accessory structure, or prefabricated accessory dwelling unit placed on the property

3. Minimum Application Submission Requirements

Please confirm that the following minimum submission materials are included and attached with the application (check✓ box):

- Copy of Building Permit plans approved by the Chief Building Official
- Detailed estimate of Total and Eligible Project Costs
- Current Pictures of Proposed Building Area
- Declaration of other Incentives
- Declaration of No Arrears on Subject Property

- **Additional Submission Requirements for an (Exterior) Accessory Apartment Unit**
 - Detailed Site Plan with Building Dimensions and Setbacks

4. Other Applications

- i) Identify if there are any other current applications on the subject property.
(official plan/ zoning by-law amendment; consent; minor variance; site plan)

- ii) Is an application also being made for other agency project incentives. If yes, specify name of provider and value of incentive

PART B: OWNER, APPLICANT INFORMATION

1. Registered Property Owner(s)

Name(s)

Address(es)

Phone

Fax

Email Address

Signature

Date (DD/MM/YYYY)

2. Applicant

Name

Address

Title

(owner, president, agent, etc.)

Phone

Fax

Email Address

Signature

Date (DD/MM/YYYY)

IF THE APPLICANT IS NOT THE OWNER, ITEM # 3 BELOW MUST BE COMPLETED

3. AUTHORIZATION

Must be filled in if the applicant and/or agent is not the registered owner of the land
PLEASE PRINT

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).

Witness

Signature

Date

Address

PART C: PROPERTY INFORMATION

1. Address of Subject Property(s)

2. Legal Description of Subject Property(s)

3. Property Size _____ Hectares

4. Accessory Dwelling Unit Size _____ Square Meters

5. Existing Principal Dwelling

i) Dwelling Type _____ (ie. single detached, semi-detached, townhouse)

ii) Dwelling Size _____ (Gross Floor Area)

6. Existing Zoning By-law classification

7. Heritage Designation

Is the property designated under any of the following (check✓ applicable box):

- Part IV of the Ontario Heritage Act
- Part V of the Ontario Heritage Act
- Listed as a Non-Designated Property of Cultural Heritage Value or Interest on the Municipal Heritage Register

PART D: PROJECT INFORMATION

1. Description of Proposed Project

Summary of detailed project brief required as part of application submission requirements

PART E: PROJECT SCHEDULE / PROJECT COSTS

Provide Estimated Project Timeline, Total Project Costs and Eligible Project Costs:

Start Date (month/year) _____

Completion Date (month/year) _____

Total Project Cost (\$) _____

Eligible Project Costs (\$) _____

PART F: ACKNOWLEDGEMENT / AUTHORIZATION/ DECLARATION

Acknowledgement

I, _____ as the Owner of the land that is the subject of this
(Name of Owner – printed)

application, acknowledge that **I DO** / **I DO NOT** have a pecuniary interest in the Costs as is required and provided with this application (check✓ appropriate box).

Declaration

I, _____ of the Municipality of _____,
(Name of applicant - printed)

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

A Commissioner