

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

The undersigned hereby request the Town of Ingersoll 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 _____

E-mail Address _____

b) Registered Owner (if other than applicant)

Owner's Address _____

Telephone Number _____ Fax Number _____

E-mail Address _____

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. _____

BACKGROUND INFORMATION - (cont'd.)

d) Existing use of subject property

e) Specific indication of proposed uses of land and buildings

f) Official Plan Designation (where applicable)

Schedule I-1 - Land Use Plan _____

Schedule I-2 - Residential Density Plan _____

g) Zoning By-law - Existing Zoning _____

- Requested Zoning _____

2. SITE INFORMATION

a) Zoning Provisions

Required

Proposed

by Zoning By-law 04-4160, as amended

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)	_____	_____

SITE INFORMATION - (cont'd)

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 Building(s) _____

Ground Floor Area of Proposed Development _____

Total Ground Floor Area (including existing & 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

Type	Number of Units	Floor area of Unit Type
Bachelor	_____	_____
One-Bedroom	_____	_____
Two-Bedroom	_____	_____
Three-Bedroom	_____	_____

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

b) Commercial/Industrial Uses

No. of Buildings Proposed _____

Conversion or Addition to Existing Building Yes _____ No _____

Multiple Family Residential - (Cont'd)

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

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 _____, 20_____

Signature of Applicant

AFFIDAVIT

I/We, _____ of the _____ of
Owners Name(s) Town/City

_____ in the _____ of _____
Name of Town/City County Name of County

DO SOLEMNLY DECLARE THAT:

All of the statements contained in this application are true and I/We 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 _____

Owner/Applicant

in the _____ of _____

this _____ day of _____, _____

Owner/Applicant

A Commissioner for Taking Oaths

I/We acknowledge that the Site Plan Agreement shall be registered and that should I/we choose to have the Town of Ingersoll register the Site Plan Agreement it will be at an additional expense to the Owner.

Owner

Owner