Planning and Development staff provide applicants and owners the opportunity to obtain a zoning review of a property (including uses, buildings and structures) to determine compliance with the standards of the applicable Zoning By-law.

To request a Zoning Certificate, the applicant must submit this application form and submit it together with the following information to Planning staff:

A Site Plan of the subject property showing the following items based on property use:

Residential Uses	Non-Residential Uses
<ul> <li>Entire property, labelling the lot area and lot frontage;</li> <li>All buildings and structures including sheds, decks, porches, gazebos, etc.;</li> <li>The distance between the closest point of each building or structure and the lot lines;</li> <li>The distance between buildings and/or structures;</li> <li>Driveways, driveway width, location and setbacks to the lot lines;</li> <li>Location of any pools and cabanas; and,</li> <li>Septic system and well locations;</li> </ul>	<ul> <li>Entire property, labelling the lot area and lot frontage;</li> <li>All buildings and structures including sheds, decks, porches, gazebos, etc.;</li> <li>The distance between the closest point of each building or structure and the lot lines;</li> <li>The distance between buildings and/or structures;</li> <li>Parking area, size of parking spaces, amount of parking spaces dedicated to each use</li> <li>Gross Floor Area* and Net Floor Area* of the proposed use</li> </ul>

<sup>\*</sup>Refer to the definitions in the Town's Zoning By-law, www.caledon.ca/zoning

Owner Authorization permitting the applicant to act on the Owner's behalf to submit the application;

(Optional) A Cover Letter describing the reason for the zoning request and any proposed development or use of the property;

(Optional) A Draft Application Form where a Zoning Certificate is being requested as a prereview of a proposed application;

(Optional) A Property Survey

Application fee payment in accordance with the applicable Town of Caledon Fee By-law; and,

Any other information that may be pertinent.

List the Supporting Material:

Please note that the above-noted documents are to be submitted electronically (preferably in pdf format) and they must be readable/scalable when printed on maximum 11 x 17 format.



Please identif	y the Purpose of the Zoning Certificate.
Zoning	Pre-Review in Advance of Application
Motor \	Vehicle Sales (OMVIC)
Propar	ne Distribution
Day Nu	ursery
Other,	Please Explain:
	in the Reason for the Request, Any Proposed Development or Any Other In May Affect the Zoning Review of the Property.

### **APPLICANT CONTACT INFORMATION**

Organization/Corp	ooration Name			
Contact First Nam	ne	Contact Middle (Optional)	Name	Contact Last Name
First Name		Middle Name (Option	onal)	Last Name
Address Prefix (O	ptional)			
Street Number	Street Name		Street Typ	oe Street Direction
Unit Type	Unit Number			
City/Town			Province	
Country			Postal Co	ode
Email Address				
Phone Number an	d Extension	Phone Type		Primary Phone
Phone Number an	d Extension	Phone Type		
Phone Number an	d Extension	Phone Type		<u> </u>
Phone Number an	d Extension	Phone Type		
Phone Number an	nd Extension	Phone Type		<u> </u>



### **OWNER CONTACT INFORMATION**

#### SAME AS APPLICANT

Organization/Cor	poration Name				
Contact First Name		Contact Middle (Optional)	Name	Name Contact Last Name	
First Name		Middle Name (Optional)		Last Name	
Address Prefix (C	Optional)				
Street Number	Street Name		Street	Туре	Street Direction
Unit Type	Unit Number				
City/Town			Provinc	ce	
Country			Postal	Code	
Email Address					
Phone Number ar	nd Extension	Phone Type		Prima	ry Phone
Phone Number ar	nd Extension	Phone Type			
Phone Number ar	nd Extension	Phone Type			
Phone Number ar	nd Extension	Phone Type			
Phone Number ar	nd Extension	Phone Type			



### **PROPERTY INFORMATION**

Street Number	Street Nar	me	Street Type	Street Direction
Unit Type	Unit Numb	per		
Roll Number				
Legal Description				
Site Area (hectare or square	metres)	Frontage (metres)	Depth (n	netres)
•		Subject Property are	e: (check those tl	hat apply)
Municipal W Individual P	`			
Communal V				
	ther Water B	ody		
Other:				
Existing Sewage D	isposal Serv	ices on the Subject	Property are: <i>(ch</i> ec	k those that apply)
Municipal S	anitary Sewe	rs		
Private Indiv	idual Septic	System		
Private Com	munal Septi	c System		
A Privy				
Other				



Please Identify All Existing Uses and Buildings/Structures on the Property. (Where there are more uses, buildings or structures existing, attach further details in supporting documentation.)

Existing Use	Year Established	Was the Use Established Without Permissions
(i.e. Residential – House)	(i.e. 2008)	(Yes, No, Unknown)
	,	, , ,
Is the Property Vacant? Y	es No	
Building/Structure Type		Date Constructed
Front Lot Line Setback (metric unit	s)	Height (metric units)
Rear Lot Line Setback (metric units	5)	Dimensions (metric units)
Side Lot Line Setback (metric units	3)	Total Floor Area (metric units)
Side Lot Line Setback (metric units	s)	
Building/Structure Type		Date Constructed
Front Lot Line Setback (metric unit	s)	Height (metric units)
Rear Lot Line Setback (metric units	s)	Dimensions (metric units)
Side Lot Line Setback (metric units	3)	Total Floor Area (metric units)
Side Lot Line Setback (metric units	3)	



Evicting Hea

Please Identify All Proposed Uses on the Property. (Where there are more uses, buildings or structures existing, attach further details in supporting documentation.)

Proposed Use (i.e. Residential – House)

Is a Building/Structure Proposed to be Constructed on the Property as Part of This Application?

Yes No

Building/Structure Type Height (metric units)

Front Lot Line Setback (metric units)

Dimensions (metric units)

Rear Lot Line Setback (metric units)

Total Floor Area (metric units)

Side Lot Line Setback (metric units)

Building/Structure Type	Height (metric units)
Front Lot Line Setback (metric units)	Dimensions (metric units)
Rear Lot Line Setback (metric units)	Total Floor Area (metric units)
Side Lot Line Setback (metric units)	



**Side Lot Line Setback (metric units)** 

I declare that the information entered on this form and all the attached documents are true and correct to the best of my knowledge.

Personal information contained on this form is collected under the authority of the *Municipal Freedom of Information and Protection of Privacy Act*, and will be used for the purpose of submitting a Zoning Certificate application. Questions about this collection should be directed to the Municipal Freedom of Information Co-ordinator, Town of Caledon, 6311 Old Church Road, Caledon, Ontario, L7C 1J6, 905.584.2272

#### SUBMISSION OF THE APPLICATION FORM

Please use the Town's online request form, or print, scan and submit the completed Zoning Certificate Application Form and required information in person or by e-mail to:

Planning and Development Community Services Department Town of Caledon T.: 905-584-2272 x. 7338

Email: planning@caledon.ca

#### ZONING CERTIFICATE PROCESS OVERVIEW

Once the applicant has submitted the application form, site plan and required fee, Zoning staff will complete a zoning review of the property. A Zoning Certificate will be forwarded to the applicant by email within 10 business days.

Please note that all comments offered by staff is preliminary and based solely on the information available at the time of the application.



