

Application for Zoning Certificate

Owner(s) Information

First name(s)

Last name(s)

Company (if applicable)

Street address

City/Town

Province

Postal code

Telephone number

Email

Authorized Agent

First name(s)

Last name(s)

Company (if applicable)

Street address

City/Town

Province

Postal code

Telephone number

Email

Subject Property

Property address

Registered plan(s)

Lot/Block(s)

Reference plan(s)

Part(s)

Lot(s)

Concession(s)

Statistics for Subject
Lands

Area (m² or ha)

Frontage (m)

Depth (m)

Details of Proposal

Submissions for

- New construction
- Alteration/repair
- Swimming pool
- Addition to existing building
- Demolition
- Other

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Details of Proposal

- Type 1:** Accessory residential buildings and structures (e.g. garages, porches, balconies, decks, cabanas).
- Type 2:** New House (max. 2 units) and additions, conversions, and alterations to houses. Applications may include accessory structures on the same site.
- Type 3:** New buildings, additions, and alteration to a building other than a house less than or equal to 300 m² . Applications may include accessory structures on the same site.
- Type 4:** New buildings, additions, and alteration to a building other than a house greater than 300 m² . Applications may include accessory structures on the same site.
- Type 5:** All other proposals (i.e. driveway widening, landscaping, site alteration, etc.).
- Type 6:** Swimming Pool

Status

Proposed

As-Built

Current uses and structures

Provide detailed description

Owner Authorization

All registered owners must provide sign off and acknowledgement of this application:

Registered Owner #1

Registered Owner #2

Print Name

Print Name

Applicant Signature

Applicant Signature

Authorization

Are you Owner Agent

If the applicant is not the owners of the land that is subject of this submissions, the written authorization of the owner that the applicant is authorized to make the submission must be included with this form or the authorizations set out below must be complete.
(Please upload authorization form)

Consent of the Owner / Agent

Complete the consent of the owner concerning personal information set below (or the written authorization of each owner in the case of shared ownership).
For the purpose of the Municipal Freedom of Information and Protection of Privacy Act, I authorize and consent to the use by or the disclosure to any person or public body any personal information that is collected for the purposes of processing this submission. I also agree to the Township, its employees and agents to enter upon the subject of property for the purposes of conducting survey, inspection and test that may be necessary for the processing of this submission.

Date

Notice of Collection: Personal information is collected on this form under the authority of the Municipal Act, s. 11. The purpose of this collection is to administer the Application for Zoning Certificate. The personal information provided on this form is protected in accordance with Municipal Freedom of Information and Protection of Privacy Act. Should you have any questions or concerns regarding the collection of personal information, please contact the Planning Department, King Township, 2585 King Road, King City, L7B1A1 (905) 833-5321.