



2021 Division Road North
Kingsville, Ontario N9Y 2Y9
Phone: (519) 733-2305
www.kingsville.ca

APPLICATION FOR: PLAN OF SUBDIVISION OR CONDOMINIUM

Instructions

Pre-consultation with the Planning Department is required.

Complete all Sections of the application. Include the authorization of the registered property owner(s) if required, see Authorization Page

Applications must include FIVE copies of all supporting plans with all appropriate details relating to the requested Subdivision or Condominium.

Submit the completed application, all supporting material and applicable application fee to the Planning Department, Town of Kingsville Municipal Office

Application which are not complete or missing required fee(s) may be returned to the applicant. Administration also reserves the right to request additional information.

Fees

Fees are subject to change. Cheques are to be made payable to the Town of Kingsville.

Type of application:

- PLAN OF SUBDIVISION - (Fee: \$5,900 /plus external costs / ERCA Fee: \$300) TOTAL:\$6,200
- PLAN OF CONDOMINIUM - (Fee: \$4,000 / plus external costs / ERCA Fee: \$300) TOTAL: \$4,300
- SUBDIVISION REDLINE AMENDMENT - (Fee: \$1,150 / plus external costs / ERCA Fee: \$300) - TOTAL: \$1,450

Contact Information

Robert Brown, H. Ba. MCIP, RPP - Manager, Planning Services ext 250

rbrown@kingsville.ca

If you prefer to complete the application offline please click here for a [printable copy](#)

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Application No: (office use only)

PART A - APPLICATION DETAILS

NAME OF APPROVAL AUTHORITY - COUNTY OF ESSEX

Date that pre-consultation with the County of Essex Manager of Planning was completed *

1. Date of pre-consultation with Town: *

2. Date application received by Town:

3: Date application deemed complete by Town:

4: Name of registered owner(s) * 

Best Contact Number: *

Alternative Contact Number: *

Full Mailing Address: *

E-Mail Address: *

Name of Solicitor, Authorized Agent or Applicant (if applicable):

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Full Mailing Address: *

Please specify to whom all communications are to be sent:

Best Contact Number: *

5. Location and description: *

6: Are you aware of any registered, non-registered easements or restrictive covenants on the property(s) in question? *

Yes

No

If Yes, Please provide details:

7. Size of the subject parcel (metric):

Frontage: *

Depth: *

Area: *

Irregular Shaped:

Yes

No

Dimensions shown on attached sketch:

Yes

No

8. Current Official Plan designation of subject land:

9. Current zoning of the subject land:

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10. Current use(s) of the subject land:

11. Date the subject land was acquired by current registered owner: *

12. Has the subject property ever been the subject of one of the following applications:

- Official Plan Amendment Zoning By-law Amendment
- Consent Plan of Subdivision

If known, indicate the file number and the status of the foregoing application (s):

13. The access to the severed parcel is from one of the following:

- Municipal Road County Road Provincial Highway
- Private Road Water

14. Type of water service available to the subject parcel?

- Municipal
- Well(s)
- Private Communal System

15. Type of sanitary disposal system available to subject property?

- Municipal Private Septic Systems
- Private Communal System Other

16. Type of storm water drainage system available to the subject property:

- Municipal Storm Sewer Municipal Drain Natural Water Course
- Swales Other (Specify) _____

17. If the development will be serviced by private water or septic have any of the following been completed?

- Servicing Options Report Hydro-geological Report

18. If the development will be serviced by private water or septic is MOECC approval required?

- Yes No

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19. Has the subject property been assessed for possible archaeological potential?

Yes

No

If yes, has an archaeological assessment been completed by a qualified individual?

Yes

No

Pending

If yes, has a letter of clearance been provided by the Ministry of Tourism, Culture and Sport?

Yes

No

Pending

20. Has an Environmental Impact Assessment and Species at Risk Assessment been completed by a qualified individual?

Yes

No

If yes, has the Ministry of Natural Resources & Forestry issued a letter of clearance or applicable permit?

Yes

No

Pending

If yes, is a copy of the MNRF letter or permit included with this application?

Yes

No

Pending

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21. Please provide the following information pertaining to the draft plan of subdivision:

Type of development proposed if residential:	No. of units or dwellings	No. of lots or blocks	Units per hectare
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Type of development proposed if residential:	No. of units or dwellings	No. of lots or blocks	Units per hectare
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Type of development proposed if residential:	No. of units or dwellings	No. of lots or blocks	Units per hectare
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Type of development proposed if residential:	No. of units or dwellings	No. of lots or blocks	Units per hectare
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Type of development proposed if non-residential:	No. of units	No. of lots or blocks	Units per hectare
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Type of development proposed if non-residential:	No. of units	No. of lots or blocks	Units per hectare
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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22. Plan of Condominium Approval:

Has a site plan for the proposed condominium been approved?

Yes

No

Has a building permit for the proposed condominium been issued?

Yes

No

Has a site plan agreement been entered into?

Yes

No

Is the proposed condominium:

Under construction

Completed

Part B - Authorization

To: Clerk/Planner, Town of Kingsville

I/WE, the undersigned, being the registered owner(s) of the above lands hereby authorize the individual noted below to act on my/our behalf regarding the lands which are the subject of this application.

Name of Solicitor or Agent acting on your behalf:

Town/Municipality of the Solicitor or Agent:

Date: _____

Signed: _____

Witness: _____

Date: _____

Signed: _____

Witness: _____

Dated at the _____ of _____ in the _____ of _____
this _____ day of _____, 20____.

Part C - Permission to enter property

To: Clerk/Planner, Town of Kingsville

I hereby authorize the Town Planner or his or her delegate or members of the staff of the Corporation of the Town of Kingsville to enter upon the subject lands and premises for the purpose of evaluating the merits of this application and subsequently to conduct any site inspections that may be required as a condition of approval. This is their authority for doing so.

Pertaining to lands described as: (municipal address) *

Date: _____

Signed: _____

Witness: _____

Date: _____

Signed: _____

Witness: _____

Note: Personal information on this form is collected under the authority of the Planning Act, RSO. 1990, Section 51 and will be used for contacting the applicant(s) and for the processing of the application. Questions about this collection should be directed to the Director of Corporate Services, 2021 Division Road North, Kingsville, ON N9Y 2Y9 519-733-2305

DECLARATION (INDIVIDUAL/JOINT OWNERSHIP)

I _____ of the _____ of _____ in
the County/Municipality of _____ solemnly declare that
all the statements contained in this application and any supporting documentation
is true, and I make this solemn declare 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 Town
Kingsville, in the County of Essex
this _____ day of _____ 20__.

A Commissioner.etc. (office use only)

Signature of Registered Owner(s), or
Authorized Agent

DECLARATION (OFFICER OF CORPORATION)

I _____ of the _____ of _____ in
the County/Municipality of _____ am the
_____ of the corporation (owner) of the property which is the
subject of this application. I solemnly declare that all the statements contained in
this application and any supporting documentation is 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 Town
Kingsville, in the County of Essex
this _____ day of _____ 20__.

A Commissioner.etc. (office use only)

Signature of Registered Owner(s), or
Authorized Agent

Thank You

Please submit completed application to Planning Services