



**Application for Minor Variance, Extension or Enlargement of a
Legal Non-conforming use, Change of Legal Non-conforming Use or
Interpretation of General terms**

(Under Section 45 of the Planning Act, R.S.O., 1990, c.P.13, as amended)
Updated: January 2023

FOR OFFICE USE ONLY
File # _____
Property: _____
Date Reviewed: _____ By: _____
Date Deemed Complete: _____
Hearing Date: _____

Date Received:

COMPLETE APPLICATION

The information requested by this application form and fees are required to constitute a “Complete Application.”

Please complete all applicable sections of this application. All measurements are to be provided in **metric units**. The information requested on this application is required to review the proposal. An incomplete application will be returned to the Registered Owner/Authorized Agent. If you have questions regarding the information requested on this application, please contact the Planning, Building and Development Department.

Information within this application is collected under the authority of the Ontario Planning Act and will be used by the City of Niagara Falls in the processing of this application. This information as well as supporting document, studies and reports may be used by other departments as well as agencies for the purpose of assessing the proposal and preparing comments. This information may also be available and released to the public upon request.

PUBLIC CONSULTATION

Applicants and/or their agents are required to participate in the public meetings hosted by City staff to inform surrounding property owners about proposed development.

FEES

Separate cheques made payable to the City, Region, and NPCA are required.

The Region accepts on-line payments through their on-line payment portal:
<https://www.niagararegion.ca/business/payments/default.aspx>

If fees are paid directly to the Region, please provide a copy of receipt with application submission.

**Fees are current as of the update of the application form. Please consult with City and Agency staff, or the respective agency websites, to confirm amounts identified on your pre-consultation meeting report.

If you have any questions regarding the information requested on this application, please contact the Secretary Treasurer to the Committee of Adjustment.

Applicants must submit the following with the Committee of Adjustment Application. Applicants are advised to review their application in person with the Planning Department prior to submission. Incomplete applications may result in delayed processing and hearing dates.

The following plans, reports, and information must accompany this application in a digital format:

- Application
- Deed
- Application fees (Schedule A)
- Declaration Form (Schedule B)
- Site Access permission form (Schedule C)
- Owner authorization (Schedule D)
- Sketch

Sketch Requirements: drawn to scale in metric, showing all the following:

- | | |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Property line dimensions <input type="checkbox"/> Size and type of all buildings and structures <input type="checkbox"/> Dimensions between buildings and structures to property lines <input type="checkbox"/> Number of storeys and height of building <input type="checkbox"/> Parking spaces and maneuvering aisles <ul style="list-style-type: none"> <input type="checkbox"/> Properly sized and spaces numbered. <input type="checkbox"/> Sidewalk and curb locations <input type="checkbox"/> Size and type of new building additions <input type="checkbox"/> Scale of plan <input type="checkbox"/> North Arrow <input type="checkbox"/> Street Names <input type="checkbox"/> Identify location of variance(s) <input type="checkbox"/> Driveway location and width <input type="checkbox"/> Tree locations <input type="checkbox"/> Building coverage (% of lot area) <input type="checkbox"/> Landscaped area (% of lot area) | <ul style="list-style-type: none"> <input type="checkbox"/> Location, size, dimensions of all existing and proposed structures to remain or to be removed on the subject land. <input type="checkbox"/> All setbacks: front yard depth, rear yard depth, side yard width (exterior and interior) <input type="checkbox"/> Existing uses of abutting properties <input type="checkbox"/> Location of all natural and artificial feature's location on the subject land and adjacent land that may affect the application (opinion of applicant) <input type="checkbox"/> Location of Septic System and well <input type="checkbox"/> Location, width, centerline, and name of any roads within or abutting the subject land (indicating whether it is an unopened road allowance, public travelled road, private road or right-of-way) <input type="checkbox"/> If water access, location of parking and docking facility. <input type="checkbox"/> Location and nature of any easements of property |
|---|---|

This application will be circulated to various agencies for review and comment. Where the scope or nature of the application requires input from other agencies, additional copies of this application and accompanying plans, reports, and information may be required.

1. Type of Application			
<input type="checkbox"/> Minor Variance (complete sections 1 – 12) <input type="checkbox"/> Extension or Enlargement of a Legal Non-Conforming Use (Section 1-5 and 7-13) <input type="checkbox"/> Change of Legal Non-conforming use (Section 1-5 and 7-14) <input type="checkbox"/> Interpretation of General Terms (Section 1-5, 7-14 and 15)			
2. Details of the Subject lands			
Municipal Address		Assessment Roll Number	
Legal Description			
Date the subject lands were acquired:		Date of construction of the buildings or structures on the land:	
Lot Frontage		Width of road allowance	
Lot Depth		Width of street	
Lot Area		Existing Use: (Residential, Industrial, Institutional, Commercial)	
Description of easements, rights-of-way, or restrictive covenants applicable to the subject lands (if applicable):			
3. Registered Owner (as shown on the deed and title of the property)			
Name	Company Name	Municipality	
Mailing Address		Unit Number	Postal Code
Province	Email	Telephone	
4. Authorized Agent (if one has been authorized)			
Name	Company Name	Municipality	
Mailing Address		Unit Number	Postal Code
Province	Email	Telephone	
Contact for all future correspondence (Select one)			
<input type="checkbox"/> Registered Owner <input type="checkbox"/> Authorized Agent			
5. Official Plan and Zoning Information			
Official Plan designation(s) of the subject lands:		Zoning of the subject lands:	

6. Details of the Proposal

Show the extent of the relief being applied for:

By-law Section	Provision	By-law Requirement	Proposed	Extent of Variance

Explain why the proposed use cannot comply with the provisions of the Zoning By-law:

7. Buildings or Structures currently existing or proposed for the subject land (metric):

Dimensions	Existing	Proposed
1. Dwelling		
Front Yard Setback		
Rear Yard Setback		
Side Yard Setback		
Side Yard Setback		
Lot coverage (m ²)		
Ground Floor Area		
Total Floor Area		
Width of building		
Length of building		
Height of building		
Number of Storeys		
2. Accessory Building		
Front Yard Setback		
Rear Yard Setback		
Side Yard Setback		
Side Yard Setback		
Lot coverage (m ²)		
Ground Floor Area		
Total Floor Area		
Width of building		
Length of building		
Height of building		
Number of Storeys		
3. Other Building (i.e. shed)		
Front Yard Setback		
Rear Yard Setback		
Side Yard Setback		
Side Yard Setback		
Ground Floor Area		
Lot coverage (m ²)		
Total Floor Area		
Width of building		
Length of building		
Height of building		
Number of Storeys		

8. Access (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Public road maintained all year
<input type="checkbox"/> Public road maintained seasonally
<input type="checkbox"/> Waterway | <input type="checkbox"/> Niagara River Parkway
<input type="checkbox"/> Private easement
<input type="checkbox"/> Provincial highway |
|---|--|

9. Municipal services available

- Water
 Sanitary Sewers
 Storm Sewers

10. Previous Applications

Have the subject lands ever been the subject of an application under the Planning Act, R.S.O. 1990, c. P.13, as amended for approval of a plan of subdivision or condominium, a consent, a minor variance, a site plan, an official plan amendment, or a zoning by-law amendment?

- Yes
 No
 Unknown

If yes, provide the information requested below for each previous application:

Application Type	File Number	Status of the Application

11. Concurrent Applications

Application Type	File Number	Status of the Application

12. Enlargement or extension of a Legal Non-Conforming Use

If you are requesting the Committee of Adjustment to consider the enlargement or extension of a building or structure for a use not in conformity with the By-law, however, it is a use legally established prior to the by-law, answer the following:

Current Zoning of the subject land:

General use(s) currently established in the building or structure:

How long has the use been in existence:

If the use(s) described above is not a residential use describe more precisely the principle operational aspects of the use:

What use(s) or what part of your operation is proposed for the extension or enlargement:

Describe how the proposed extension or enlargement has had regard to existing zoning regulations and possible environmental considerations:

13. Change of Legal Non-Conforming Use

If you are requesting the Committee of Adjustment to consider a change in a legal non-conforming use to another use you must answer the following, as well as section 13.

What is the proposed change of use to:

Are any building extensions or enlargements proposed for the proposed use:

- Yes
- No

Describe why the proposed use is, in your opinion, more compatible with the area than the existing use:

14. Interpretation of General Terms

If you are requesting the Committee of Adjustment to consider an application under Section 45(2)(b) of the Planning Act, describe the section of the By-law and the basis of your request:

What is the present zoning of the subject lands:



SCHEDULE A 2023 FEES

City of Niagara Falls Application Fees	Fee (includes HST)
Consent Application	\$3,675.00
Consent Application to separate two existing units	\$1,850.00
Change of Conditions	\$600.00
Minor Variance	\$2,300.00
Re-notification/Rescheduling (consent/minor variance)	\$300.00
Concurrent Consent/Minor Variance Application	\$4,450.00
Concurrent Consent Application - First Application	\$3,675.00
Each additional consent application on same lands	\$550.00
Request for Exemption from 2-year waiting period for variances	\$425.00
Additional fee for calling of a Special Meeting to address an application	\$800.00

Other Fees:	Fee (includes HST)
<p>Niagara Peninsula Conservation Authority (NPCA) Properties near a waterbody/water course or lands designated "hazard" Pre-consultation with the NPCA is necessary and will determine if application is subject to this fee.</p>	<p>Consent: Minor - \$1,050.00 Major - \$1,987.50</p> <p>Minor Variance: Minor - \$ 600.00 Major - \$1,800.00</p>
Niagara Region (2022 fees)	
Minor Variance Review	\$435.00
Consent Review – Within Urban Area	\$645.00
Consent Review – Rural/Outside Urban Area	\$905.00
Consent with Private Sewage System Review	\$400.00
Niagara Escarpment Commission Development Permit	
Development Permit Review	\$815.00
Minor Development Permit Review (No Provincial or Regional concerns identified such as sheds, garages, pools, etc.)	\$435.00



**SCHEDULE B
DECLARATION OF THE APPLICANT OR AUTHORIZED AGENT**

The following declaration must be signed by the applicant or agent in the presence of a Commissioner for the Taking of Affidavits.

I, _____
(Name of Owner or Applicant/Agent on behalf of owner if required)

of the Town/City of _____
(Town, City or Township)

in the Regional Municipality of _____
(Region/County/District)

solemnly declare that all the 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 fore and effect as if made under oath y the virtual of THE CANADA EVIDENCE ACT.

Dated at the: _____
(Town, City or Township)

in the Regional Municipality of _____
(Region/County/District)

this _____ day of _____ 2023.
(day) (month)

Name (Please print)

Signature

COMMISSIONER:

Declared before me at the Town/City of _____
(Town, City or Township)

in the Regional Municipality of _____
(Region/County/District)

this _____ day of _____ 2023.
(day) (month)

A Commissioner, etc.

Commission Stamp



SCHEDULE C SITE ACCESS PERMISSION FORM

To be completed by the owner:

I / We, _____ being the registered owner(s)
of _____
(Subject Lands/Municipal Address)

hereby grant City of Niagara Falls staff, agencies, and Members of a City Committee to enter the subject site to review and confirm the information provided on this application.

Date at the Town/City of _____
(Town/City or Township)

In the Regional Municipality of _____
(Region/County/District)

This _____ day of _____ 2023.
(day) (month)

Owner Name (Please print)

Owner Signature

Owner Name (Please print)

Owner Signature

CORPORATE SEAL (if applicable)

Note: If the subject property is owned by a numbered company, please include the names/signatures of the principal owners.



SCHEDULE D – OWNER AUTHORIZATION

AUTHORIZATION TO ACT ON BEHALF OF THE OWNER

(Must be completed if the applicant/agent is not the registered owner of the lands)

I / We, being the registered owner(s) of the lands subject to this application hereby authorize _____
(Name of Person and Company if applicable)

of the Town/City of _____
(Town/City or Township)

In the Regional Municipality of _____
(Region/County/District)

This _____ day of _____ 2023.
(day) (month)

Owner Name (Please print)

Owner Signature

Owner Name (Please print)

Owner Signature



NOTE: if the registered owner is a corporation, the corporate seal must be affixed to this form in addition to the signature of authorized signing officers.