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Committee of Adjustment City Hall, 5th floor, 71 Main Street West Hamilton, ON L8P 4Y5

Phone: 905-546-2424, ext. 4144

APPLICATION FOR VALIDATION OF TITLE

		Under Section 57 of the <i>Planning Act</i> , 1990				
					Office Use Only	
				Ар	plication No	
				Da	te Received:	
Name	of Owner	(s)				
Addre	ess					
Telephone Number			Р	Postal Code		
Name	of Owner	's solicitor				
or aut	horized aç	gent (if applica	ble)			
Addre	ess					
Telep	hone Num	ber	Р	Postal Code		
Pleas	e specify	to whom all	communicat	ions sh	ould be sent:	
0	wner	Solicitor	Agent			
In who	ose name	is the property	y registered?			
When	was the p	property purch	ased?			
LOCA	TION OF	LAND:				
			Geograp	ohic or		
Municipality		Former Township				
Lot(s) No.		and Concession No.				
Registered Plan No.		No.			Lot(s) No.	
Refer	ence Plan	No.			Part(s) No.	
Street	t No.	Street Na	ame			
Descr	ription of la	ınd:				
Fronta	age	De	pth		Area	
Existing Use		Р	Proposed Use			
Has a	building p	ermit been iss	sued?			
(a)	Has cons	struction comm	nenced?			
(b)	Number and type of buildings and structures. (Please indicate those					
	buildings or structures to be demolished).					
	Existing					
	Proposed	1				

8.	Are there any existing restrictions affecting the land holding (i.e. covenants, rights-of-ware easements, etc., or any proposed reservations of interest that will affect the subject land						
	-	es", the details of all sonown on the plan.	Yes such existing restrict	No tions and proposed res	servations must		
9.	Did the previous owner retain any interest in the subject land?						
	If "ye	s", please give detai	Yes ils.	No			
10.	Do y	ou have any interest	in any abutting pard Yes	cel of land? No			
	If "ye	s", details must be s	shown on the plan.				
11.	Type of road access (specify)						
12. What type of water supply is proposed? (Check appropriate bo				eck appropriate box)			
		cipally owned and ated pipe water supp	oly	Lake Well			
	Othe	r (Specify)					
13.	What type of sewage disposal is proposed? (Check appropriate box)						
		cipally owned and ated sanitary sewers	3	Septic tank Pit privy			
	Othe	r (Specify)					
14.	Whe	When will water supply and sewage disposal services be available?					
15.	(a)	Has the owner sev	vered any land from	this holding? Yes	No		
	(b) If the answer to (a) is "Yes", please indicate previous severances on the required sketch and supply the following information for each lot severed						
		Grantee's name					
		Relationship (if an	y) to owner				
		Use of parcel		Date parcel create	d		
16.	Why	do you consider you	ur title may require va	alidation?			
17.	Is the	subject parcel locate	ed within or adjacent	to an Environmentally	Sensitive Area?		
		-	Yes	No			

18.	Affidavit or sworn declaration					
l,	of the	of				
in the						
make is of th	nly declare that all the statements contained this solemn declaration conscientiously belie ne same force and effect as if made under or nce Act.	eving it to be true, and knowing that it				
DECL	ARED before me at the					
	of					
in the	of					
this	day of, 20)	signature of owner(s), or authorized solicitor/agent				
A Con	nmissioner, etc.					
<u>NOTE</u>	the owner's written authorization must a applicant is a corporation acting without	this application is signed by an agent or solicitor on behalf of an applicant, ne owner's written authorization must accompany the application. If the pplicant is a corporation acting without an agent or solicitor, the application nust be signed by an officer of the corporation and the corporation's seal (if ny) must be affixed.				
APPLI	ICANT'S CHECKLIST					
Have y	you remembered to attach:					
	1 copy of the completed application to are applying to have the title validate (Ensure you have a copy for yoursel					
	1 copy of the prescribed sketch or survey?					
	1 copy of all supporting materials indicating the contravention of the Planning Act including PIN print outs and other items deemed necessary.					
	1 copy of a letter of authorization, if r	1 copy of a letter of authorization, if required. (See note above)				
	The required fee? (A cheque or mo	The required fee? (A cheque or money order in the amount of \$475.00				

payable to the City of Hamilton)