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(For NEC office use only)



NIAGARA ESCARPMENT COMMISSION

APPLICATION TO AMEND THE NIAGARA ESCARPMENT PLAN

(FMS #0115 - Revised August 15, 2019)

THE NIAGARA ESCARPMENT PLANNING AND DEVELOPMENT ACT, R.S.O. 1990, AS AMENDED

NIAGARA ESCARPMENT COMMISSION 232 GUELPH STREET GEORGETOWN, ONTARIO L7G 4B1

> Phone: 905-877-5191 Fax: 905-873-7452

Email: necgeorgetown@ontario.ca Website: http://www.escarpment.org NIAGARA ESCARPMENT COMMISSION 1450 7th AVENUE OWEN SOUND, ONTARIO N4k 2Z1

> Phone: 519-371-1001 Fax: 519-371-1009

Email: necowensound@ontario.ca Website: http://www.escarpment.org

This form is intended to assist an applicant and the Niagara Escarpment Commission in considering proposed amendments to the Niagara Escarpment Plan. Not all parts of this application may be necessary or relevant to each proposal. Please attach additional pages or reports as required. Please include justification and supporting information with the application. Niagara Escarpment Commission staff would be pleased to discuss the form and assist in completing it. The Niagara Escarpment Commission may request more information after reviewing the complete submission.

| OWNER (Required) | | | | | |
|---|---|--------------------------------------|---------------------|--------------|--|
| Name: <u>2691715 ONTARIO</u> | LIMITED | | | | |
| Mailing Address: 401 Bowes | Road | | | | |
| Concord City/Town | Ontario Province | | L4K 1J4 Postal Code | | |
| Phone: | 0.0000000000000000000000000000000000000 | E-mail: | Postal Code | | |
| 2. APPLICANT or AGEN | | | | | |
| Mailing Address: 21 King Str Street/P.O. Box | eet West, Suite 1502 | | L8P4W7 | | |
| Hamilton City/Town | Province | | Postal Code | | |
| Phone: (289) 241-0039 | | E-mail: rlarocq | ue@thebiglierigro | up.com | |
| 3. PROPERTY LOCATIO | N & INFORMATION | | | | |
| Municipality: <u>Hamilton</u> | Civic/S | Street Address #: 15 Emergency #) | 59 & 163 Sulphur | Springs Road | |
| Lot: 42 Conc | ession: 2 | and/or L | ot: | Plan: | |
| Assessment roll number or P | N: 174460027 | Lot Size | e: 7.35ha | | |

| 4. PROPERTY SERVICING | | | | | | |
|--|--|--|--|--|--|--|
| Existing Road Frontage: Municipal Private Proposed Road Frontage: Municipal Private | | | | | | |
| Existing Water Supply: Municipal Private Proposed Water Supply: Municipal Private | | | | | | |
| Existing Sewage Disposal: Municipal Private Proposed Sewage Disposal: Municipal Private | | | | | | |
| 5. IS THE PROPOSAL THE SUBJECT OF A CURRENT APPLICATION? Please identify: | | | | | | |
| Development Permit under Niagara Escarpment Planning and Development Act | | | | | | |
| The Planning Act (Official Plan or Zoning By-law Amendment) | | | | | | |
| The Aggregate Resources Act (License) | | | | | | |
| Committee of Adjustment (Minor Variance) | | | | | | |
| Land Division Committee (Severance) | | | | | | |
| Other | | | | | | |
| 6. DESCRIPTION OF THE PROPERTY | | | | | | |
| 6. DESCRIPTION OF THE PROPERTY | | | | | | |
| Describe the current use of the property including any existing buildings or structures: | | | | | | |
| Residential | | | | | | |
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| 7. CATEGORY OF THE PROPOSED AMENDMENT: | | | | | | |
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| | | | | | | |
| ☐ Request for Urban Servicing ☐ Change to Plan Boundary | | | | | | |
| Other | | | | | | |
| | | | | | | |
| 8. DETAILED DESCRIPTION OF PROPOSED AMENDMENT (Please use additional page(s) as required) | | | | | | |

9. JUSTIFICATION AND RATIONALE (INCLUDING REASONS, ARGUMENT AND EVIDENCE IN SUPPORT OF THE AMENDMENT) (See Niagara Escarpment Plan Amendment Guidelines)

- a) The justification submitted with the application should address the following:
 - 1. Analysis of how the proposed amendment is consistent with the *Niagara Escarpment Planning and Development Act*, the Niagara Escarpment Plan, and shall be consistent with other relevant Provincial plans.
 - A justification which includes the rationale for the amendment, as well as reasons, arguments or evidence in support of the change to the Plan proposed through the amendment.

The following studies and reports may be necessary to be submitted in support of justification of the proposed amendment (The applicability of the following will depend on the nature of the application.):

| | Agricultural Land Use Impacts |
|---|--|
| | Air Quality Impact Assessment |
| × | Engineering Reports |
| × | Environmental Impact Study |
| × | Geological Studies |
| × | Grading Plans – Existing and proposed and Slope Stabilization Plans and Typical Cross Sections |
| | Historical/Cultural/Archeological Impact Assessment |
| × | Hydrogeological Impact Assessment |
| | Landscape/Visual Impact Analysis |
| | Noise Impact Assessment |
| | Setback from the Brow of the Escarpment |
| | Suitable for Septic Systems |
| × | Traffic Impact Assessment |
| × | Tree Removal / Planting including Berming and Landscaping |

10. SITE PLAN

Other: __

Please attach an accurate Site Plan drawn to scale. The Site Plan may be drawn on a blank sheet; on an attached Survey, or by using mapping software (Ontario Make a Map etc.). The Site Plan must show existing features, such as, buildings and structures, streams, changes in grades, rock outcrops, driveways, forested areas and proposed uses or changes to the property or the features.

<u>Note:</u> For Amendments regarding Mineral Resource Extraction Areas please provide copies of the Site Plan as required by Regulation under the Aggregates Resources Act.

11. SIGNATURES

Personal information (i.e., name, address, phone, email) is being collected under the authority of the *Niagara Escarpment Planning and Development Act, RSO, 1990, as amended*, and will be used to process this application, which will include site visit notifications and in some cases appeals and hearings. Questions regarding the collection and use of this personal information should be directed to the Manager, Administration at the Georgetown Office phone, email and mailing address set out on the front page of this application form.

By signing this application form below, I consent to the collection of my personal information. This information may be used in public meetings and in Public Interest Advisory Committee (PIAC) meetings. **This application cannot be processed without the required signatures as set out below.**

I CERTIFY THAT THIS STATEMENT IS TRUE AND CORRECT

| OWNER(S): | DATE: Desember 11.2024 |
|--|------------------------|
| (Required) | |
| APPLICANT(S) or AGENT(S) (if different from owner) | DATE: December 19,2024 |
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