

### PRE-CONSULTATION REQUEST FORM KING TOWNSHIP PLANNING DEPARTMENT

#### PRE-CONSULTATION REQUEST FORM

Pre-consultation prior to submission of an application is a critical component of the processing of an application. All applicants must pre-consult with Planning Department staff prior to submitting a Planning application. The pre-consultation meeting is hosted by the Planning Department and may include representatives from various Township Departments or external agencies, as required. The pre-consultation meeting allows the applicant and/or their representative to present and discuss the proposal with relevant staff and provides an opportunity for staff to outline the application process, provide preliminary comments, identify issues, and confirm information/materials that must be submitted in support of the planning application in accordance with King Township's Official Plan policies for a complete application.

#### **Pre-Consultation Checklist**

Completed Pre-consultation Re	quest Form
One (1) print copy of an 11"x17"	drawing, drawn to scale, illustrating the following:

- Location of subject lands and immediate surroundings, including property dimensions
- Use of adjoining lands
- General location of existing and proposed buildings, structures and features including:
  - Pedestrian and vehicular access
  - Parking and circulation
  - Location, widths, and names of all road allowances, rights-of-way, streets or highways
  - Easements, restrictive covenants affecting the subject lands
  - Location of all existing vegetation, natural features, watercourses, drainage ditches, slopes, including the location of any of such features on adjacent lands that may affect the contemplated application
  - ty

#### Timing of Pre-consultation Meeting

Upon the receipt of a completed Pre-consultation Request Form and supporting materials to the King Township Planning Department at the address noted on this Form, below, Planning staff will schedule a pre-consultation meeting in accordance with the Pre-Consultation Meeting Schedule, typically the second (2<sup>nd</sup>) Thursday following the regularly scheduled Council Page 1 of 6



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meeting. The Pre-consultation Request Form and all supporting material must be received prior to staff scheduling the pre-consultation meeting. Your request for a Pre-consultation meeting will be included in the next available meeting, but not earlier than seven (7) business days from the date of receipt of the completed form and supporting materials. Your submission will allow staff/agencies the opportunity to prepare for and gather any information necessary to property consider the proposal, and provide constructive feedback at the pre-consultation meeting.

#### Pre-consultation Letter

The applicant will be provided with a Pre-consultation Letter within 10 business days of the Pre-consultation Meeting outlining the information and materials necessary to process the required planning application(s). The supporting information and materials specified in the Pre-consultation Letter, along with the Letter itself, will be required to be submitted with the planning application(s) in order to be considered a Complete Application under the Planning Act.

#### **Contact Information**

For more information regarding the pre-consultation process, and to submit a completed Preconsultation Request Form, please contact the Planning Department:

> King Township Municipal Office 2075 King Road, King City, L7B 1A1 Phone: 905-833-5321 Email: planning@king.ca



1.

2.

### PRE-CONSULTATION REQUEST FORM KING TOWNSHIP PLANNING DEPARTMENT

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DATE RECEIVED	CE USE	CINLT			
PCM REFERENCE NO.			PC	M-	
PRE-CONSULTATION MEET	TING DA	ATF	1.0	141	
PRE-CONSULTATION MEET			:		
CONTACT INFORMATIO					
Name & Company	Mailin Code	g Address & Posta	I	Contact Inf	ormation
Registered Owner <sup>1</sup> :				Phone 1:	
				Phone 2:	
				Email:	
_				Fax:	
Applicant <sup>2</sup> :				Phone 1:	
				Phone 2:	
				Email:	
				Fax:	
Agent (Consultant/Solicitor):				Phone 1:	
				Phone 2:	
				Email:	
1.1 Please indicate to w	hom all	L correspondence re	lating	Fax:	ct chould be cont
(select one only). This		•	•	•	st should be sent
Owner	☐ App	olicant	gent		
SUBJECT LANDS INFOR	RMATIC	DN			
Municipal Address (Street # 8	& Name	)			
·		,			
Registered Plan(s)		Lot(s)/Block(s)	Refer	ence Plan(s)	Part(s)
Assessment Roll #(s)		Lot(s)	Cond	cession(s)	•
Statistics for Subject Lands:		Area ( m² or ha)	Front	age (m)	Depth (m)
Date Subject Lands Acquired	:  :		<u>I</u>		

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<sup>&</sup>lt;sup>1</sup> If there is more than one Owner, please attach a separate page with the required information. If the Owner is a numbered company, provide the name and address of the principal Owner.

<sup>2</sup> Owner's authorization is required if the Applicant is not the Owner.



3.

# PRE-CONSULTATION REQUEST FORM KING TOWNSHIP PLANNING DEPARTMENT

2.1	Existing Use of the Subject Property:
2.2	Existing Official Plan/Secondary Plan Designation:
2.3	Existing Zoning:
2.4	4 Oak Ridges Moraine/Greenbelt Land Use Designation:
PRC	DPOSAL DETAILS
3.1	Have you had any previous discussions with Planning Staff with respect to this Proposal?  YES NO  If YES, with whom did you consult?  Approximate date of consultation:
3.2	Have these lands been the subject of any other application under the Planning Act?  YES NO  If YES, please provide the File Number(s):



4.

# PRE-CONSULTATION REQUEST FORM KING TOWNSHIP PLANNING DEPARTMENT

in the preamble of this application form:	sal, including the information speci
REQUESTED MEETING ATTENDIES	
available, who would you like us to try and include in	the meeting?
Please check the relevant box.	
ownship Planning Department	
ownship Engineering and Public Works Department	
ownship Parks, Recreation and Culture Department	
ownship Finance Department	
ownship Economic Development Officer	
ownship Fire and Emergency Services	
ownship Environmental Inspector	
ownship Building Department	
Region of York Planning Department	
Region of York Transportation Department	
Metrolink	
herrollink	
ake Simcoe Region Conservation Authority	

### 5. AUTHORIZATIONS

If the applicant is not the owner of the land that is the subject of this application, the written authorization of the owner that the applicant is authorized to make the application must be included with this form or the authorizations set out below must be complete.

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l,			, am	the registered owner of the land that is the
subject	of	this	requested	meeting and I authorize to make this application on my behalf
and for th	ne purpo	se of the		n process for these lands. The agent wi
-	-		• •	Il be included in this application or collected
during the	process	ing of the	application.	
Date				Signature of Owner
onsent of t	he Regis	stered Ov	vner	
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•			•	ner concerning personal information set ou
•			•	ner concerning personal information set ou wner in the case of shared ownership).
•			•	<b>.</b>
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The Personal information (PI) collected under the authority of s.1.0.1 of Planning Act, R.S.O. 2006, c.23, s.2 as amended and, Information and material that is required to be provided to a municipality or approval authority under this Act shall be made available to the public. The purpose of this Personal information (PI) collection is to administer the Township of King pre-consultation process of this development application. Should the applicant have any questions or concerns with regard to collection of Personal Information (PI) on this application, should contact director, Planning, township of King at (905) 833-5321.