



Phone: 905.833.5321 Fax: 905.833.2300 Website: www.king.ca

## MINOR VARIANCE: PRE- CONSULTATION FORM

## **Pre-Consultation Process:**

A Pre-Consultation meeting is strongly recommended prior to the submission of a formal Minor Variance application. This meeting allows for staff to review their comments with you prior to hearing. Post meeting a Pre-Con Letter will be issued confirming discussions and listing out any further steps required.

1.	SUBJECT PROPE	RTY (full address including postal code):	
2.	OWNER(S) INFO:		
	Registered Owne	r #1	
	First Name:		
	Last Name:		
	Phone Number:		
	Email:		
	<b>Registered Owne</b>	r #2	
	First Name:		
	Last Name:		
	Phone Number:		
	Email:		
		0 (IE DIEEEDENT EDOM DRODEDTY ADDRESS LIGHED ADOVE)	
	MAILING ADDRES	S (IF DIFFERENT FROM PROPERTY ADDRESS LISTED ABOVE):	
3.	AUTHORIZED AGE	ENT INFO (List only ONE agent):	
		· · · · · · · · · · · · · · · · · · ·	
	First Name:		
	Last Name:		
	Company:		
	Phone Number:		
	Email:		





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	MAILING ADDRESS (IF DIFFERENT FROM PROPERTY ADDRESS LISTED ABOVE):		
4.	EXPLAIN YOUR PROPOSAL IN DETAIL  (Clearly indicate what elements of your proposal are EXISTING and what elements are PROPOSED. Be sure Plans submitted for review clearly show your proposal).  Do not list your variances, as staff will be confirming those post consultation.		
5.	HAVE YOU RECEIVED AN ORDER TO COMPLY? (If YES, please indicate the date on which an order was last received)		
6.	OWNER AUTHORIZATION		
	All registered owners must provide sign off and acknowledgement of this application; in doing so they are authorizing the agent listed above to provide communication and direction on behalf of the owner(s).		
	Please download the Owner/Agent Authorization Form available at: <a href="https://www.king.ca/sites/default/files/2025-06/Owner%20Agent%20Authorization%20Form.pdf">https://www.king.ca/sites/default/files/2025-06/Owner%20Agent%20Authorization%20Form.pdf</a>		