



COMMITTEE OF ADJUSTMENT: **ZONING REVIEW**
STEP 1

Application Form & Waiver Form

**YOU ARE REQUIRED TO COMPLETE ONE OF THE
ATTACHED FORMS ONLY.**

A) Complete the **Zoning Review: Application Form** to request a review by a Township Zoning Examiner who will provide you with a confirmation of the exact variances your proposal requires. A fee is associated with this review, see website for details.

***REVIEW BY A TOWNSHIP ZONING EXAMINER IS STRONGLY RECOMMENDED
PRIOR TO PROCEEDING TO A COMMITTEE OF ADJUSTMENT HEARING.***

B) Complete the **Zoning Review: Waiver Form** to confirm that you are not seeking review from Township staff and are able to provide us with the variances you require to move forward to hearing. This requires the ability to select applicable by-laws and complete the attached chart with our current zoning standards and in detail, what you are varying.



ZONING REVIEW: APPLICATION FORM

Committee of Adjustment

IMPORTANT:

COMPLETE THIS SECTION OF THE FORM IF YOU ARE REQUESTING A REVIEW OF YOUR PROPOSAL, AND CONFIRMATION OF THE VARIANCES YOU REQUIRE BY A TOWNSHIP ZONING EXAMINER.

**** REVIEW BY A TOWNSHIP ZONING EXAMINER IS STRONGLY RECOMMENDED PRIOR TO PROCEEDING TO A COMMITTEE OF ADJUSTMENT HEARING.***



Committee of Adjustment

Zoning Review: Application Form

I request that a Township Zoning Examiner review the submission of my plans and the application form below, for the purpose of confirming variances required to facilitate my proposal at a committee of adjustment hearing.

1.	SUBJECT PROPERTY DETAILS: <table><tr><td>Municipal Address:</td><td></td></tr><tr><td>Registered Plan(s):</td><td></td></tr><tr><td>Lot(s)/Block(s):</td><td></td></tr><tr><td>Reference Plan(s):</td><td></td></tr><tr><td>Part(s):</td><td></td></tr><tr><td>Concession(s):</td><td></td></tr><tr><td>Area (m2 or ha):</td><td></td></tr><tr><td>Frontage (m):</td><td></td></tr><tr><td>Depth (m):</td><td></td></tr></table>	Municipal Address:		Registered Plan(s):		Lot(s)/Block(s):		Reference Plan(s):		Part(s):		Concession(s):		Area (m2 or ha):		Frontage (m):		Depth (m):											
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Frontage (m):																													
Depth (m):																													
2.	OWNER(S) INFO: <table><tr><td colspan="2">Registered Owner #1</td></tr><tr><td>First Name:</td><td></td></tr><tr><td>Last Name:</td><td></td></tr><tr><td>Company Name (if applicable):</td><td></td></tr><tr><td>Address:</td><td></td></tr><tr><td>Phone Number:</td><td></td></tr><tr><td>Email:</td><td></td></tr><tr><td colspan="2">Registered Owner #2</td></tr><tr><td>First Name:</td><td></td></tr><tr><td>Last Name:</td><td></td></tr><tr><td>Company Name (if applicable):</td><td></td></tr><tr><td>Address:</td><td></td></tr><tr><td>Phone Number:</td><td></td></tr><tr><td>Email:</td><td></td></tr></table>	Registered Owner #1		First Name:		Last Name:		Company Name (if applicable):		Address:		Phone Number:		Email:		Registered Owner #2		First Name:		Last Name:		Company Name (if applicable):		Address:		Phone Number:		Email:	
Registered Owner #1																													
First Name:																													
Last Name:																													
Company Name (if applicable):																													
Address:																													
Phone Number:																													
Email:																													
Registered Owner #2																													
First Name:																													
Last Name:																													
Company Name (if applicable):																													
Address:																													
Phone Number:																													
Email:																													



3.	AUTHORIZED AGENT INFO (List only ONE agent):	
	First Name:	
	Last Name:	
	Company (if applicable):	
	Address:	
	Phone Number:	
	Email:	
4.	DETAILS OF PROPOSAL:	
	COA approval is required for:	Proposed Construction Existing/As-Built
	This submission is for:	New Building/Dwelling
		Addition to an existing building/Dwelling
		Accessory structures, Pools, Cabanas, Sheds
Other:		
Explain CURRENT use:		
Explain PROPOSED use:		
5.	HAVE YOU RECEIVED AN ORDER TO COMPLY? (If YES, please indicate the associated file number and compliance date)	
	1. File Number 2. Compliance date	
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: https://www.king.ca/sites/default/files/2025-06/Owner%20Agent%20Authorization%20Form.pdf	



ZONING REVIEW: WAIVER FORM

Committee of Adjustment

IMPORTANT:

COMPLETE THIS SECTION OF THE FORM IF YOU HAVE CHOSEN TO DECLINE REVIEW AND CONFIRMATION OF VARIANCES BY A TOWNSHIP ZONING EXAMINER.

**** REVIEW BY A TOWNSHIP ZONING EXAMINER IS STRONGLY RECOMMENDED PRIOR TO PROCEEDING TO A COMMITTEE OF ADJUSTMENT HEARING.***



Zoning Review: WAIVER FORM
Committee of Adjustment

I wish to proceed with an application(s) to the *Committee of Adjustment* without the benefit of having my submission reviewed by a Township of King **Zoning Examiner**, for the purposes of confirming variances required to facilitate my proposal.

- I acknowledge that any incorrect information I provide may result in:
- potential delays in the processing of my application(s)
 - an inability to obtain a building permit
 - the need for additional application(s)
 - additional fees (adjournment/recirculation)

Date:		
Name:	Owner	Agent
Signature:		

IMPORTANT INFORMATION

By completing this Zoning Review Waiver, you are assuming responsibility for identifying all variances required to facilitate your proposed development.

You will need to review the applicable By-law(s) to determine requirements. If you are submitting a Zoning Review Waiver Form, you are choosing to opt out of a staff review and confirmation of by-law requirements.

To proceed with this option, you must ensure that all variances being requested are listed in the chart below. As explained above, the omission of a variance may result in delays of processing, inability to obtain a building permit after approval, and the requirement of additional applications and fees.

Subject Property Address:	
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COMPLETE FORM BELOW:

Identify all variances required under the applicable zoning by-laws
(Countryside Zoning By-law 2022-53, Nobleton Urban Area By-law 2016-71, King City, Schomberg Urban Area Zoning By-law 2017-66).

#	Zoning By-law #	Zoning By-law Requirement	Variance request
1	<u>EXAMPLE:</u> Nobleton Urban Area By-law 2016-71	Table 6.3a permits a maximum height of 9.0 metres (measured to the highest point of the roof surface or the parapet, whichever is the greater, of a flat roof)	To permit a maximum height of 9.81 metres on the North Side, 9.98 metres on the South Side, 9.83 metres on the East Side and 9.83 metres on the West Side.
2			

10			
11			