

**CITY OF SARNIA**  
**Planning & Building Department**  
Telephone: (519) 332-0330 X3344  
Email: [planning@sarnia.ca](mailto:planning@sarnia.ca)



255 North Christina Street  
P.O. Box 3018  
Sarnia, Ontario  
N7T 7N2

**City Of Sarnia**  
**Plan of Subdivision and/or Condominium Description**  
**Application for Approval**

**NAMES**

1. a) Name of Applicant and Full Mailing Address:

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Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

email address \_\_\_\_\_

- b) Name of Applicant's Agent, Planning Consultant, and/or Consultant Engineer and full Mailing Address:

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Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

E-Mail Address \_\_\_\_\_

- c) Name of Registered Owner(s) of Subject Land(s) and full Mailing Address:

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Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

email address \_\_\_\_\_

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d) Name of Ontario Land Surveyor and full Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

email address \_\_\_\_\_

**AUTHORIZATION**

I/we \_\_\_\_\_ am/are the owners of the land that is the subject of the draft plan of subdivision application/condominium description and I/we authorize

\_\_\_\_\_ to make this application on my/our behalf.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's signature

**LOCATION/DESCRIPTION OF SUBJECT LANDS PROPOSED TO BE SUBDIVIDED**

2. a) Municipal address (if applicable):

\_\_\_\_\_

b) Legal Description (Lot/Concession/Registered Plan Numbers):

\_\_\_\_\_

\_\_\_\_\_

3. Total area of land(s) proposed to be subdivided: \_\_\_\_\_ hectares

4. Description of any adjoining land(s) in the same ownership:

\_\_\_\_\_

\_\_\_\_\_

5. Easements or restrictive covenants affecting the land(s) proposed to be subdivided (please describe):

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**PLANNING INFORMATION FOR SITE**

6. What is the current use of the subject lands?

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7. Current Official Plan Designation \_\_\_\_\_

8. Current Zoning \_\_\_\_\_

9. Total Area of Lands (in hectares) \_\_\_\_\_

10. Existing Use of Lands \_\_\_\_\_

11. Will the Plan as proposed require an amendment either to the Official Plan and/or Zoning By-law:

Yes ☐

No ☐

12. Has the land ever been subject of an application for plan of subdivision, consent to sever, minor variance, official plan amendment, zoning amendment or Minister's zoning order?

Yes ☐

No ☐

Do Not Know ☐

If yes, provide details (file number, decision):

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**PROPOSED LAND USE**

13. Indicate the intended use of land in the proposal. Please use the following definitions for residential buildings:

Detached Residential: a single detached dwelling unit  
 Semi-Detached: a residential building containing 2 dwelling units  
 Multiple Attached Residential: a residential building having 3 or more units with individual access to the street  
 Apartment Residential: a building having 3 or more dwelling units each with access to the street via a common corridor

Proposed Use	No. of Units	No. of Lots /Blocks	Hectares	Parking Provided (No. of spaces)	Density Proposed (units/ Hectare)
Detached Residential				N/A	
Semi-Detached Residential				N/A	
Multiple Attached Residential					
Apartment Residential					
Seasonal Residential (cottage or chalet)					
Mobile Home					
Other Residential					
Commercial					
Industrial					
Institutional					
Parks, Open Space	N/A			N/A	N/A
Roads	N/A			N/A	N/A
Other Use					
<b>TOTAL</b>					

14. Please provide a description of any uses identified as "other residential", "institutional" or "other use."

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**Utilities and Services on Adjoining Lands:** (mark with an "X" if existing)

15. Sanitary Sewage

- |                       |                          |
|-----------------------|--------------------------|
| (a) Municipal system  | <input type="checkbox"/> |
| (b) Individual septic | <input type="checkbox"/> |
| (c) Communal septic   | <input type="checkbox"/> |
| (d) Other             | <input type="checkbox"/> |

16. Storm Water Sewage

- |             |                          |
|-------------|--------------------------|
| (a) Sewers  | <input type="checkbox"/> |
| (b) Ditches | <input type="checkbox"/> |
| (c) Swales  | <input type="checkbox"/> |
| (d) Other   | <input type="checkbox"/> |

17. Water Supply

- |                              |                          |
|------------------------------|--------------------------|
| (a) Municipal piped water    | <input type="checkbox"/> |
| (b) Private well             | <input type="checkbox"/> |
| (c) Communal well            | <input type="checkbox"/> |
| (d) Lake or other water body | <input type="checkbox"/> |
| (e) Other                    | <input type="checkbox"/> |

18. Electric Power ☐

19. Natural Gas ☐

**Utilities and Services for the Proposed Subdivision:** (mark with an "X" if proposed)

**20. Sanitary Sewage**

- (a) Municipal system ☐
- (b) Individual septic ☐
- (c) Communal septic ☐
- (d) Other ☐

**21. Storm Water Drainage**

- (a) Sewers ☐
- (b) Ditches ☐
- (c) Swales ☐
- (d) Other ☐

**22. Water Supply**

- (a) Municipal piped water ☐
- (b) Private well ☐
- (c) Communal well ☐
- (d) Lake or other water body ☐
- (e) Other ☐

**23. Electric Power** ☐

**24. Natural Gas** ☐

**25. If private services are proposed, please specify:**

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**26. Have necessary approvals been obtained from the County of Lambton and/or Ministry of Environment for proposed private services?**

- Yes ☐ (If yes, attach copies of appropriate certificates)  
No ☐

**27. If the Plan would permit development of 5 or more lots or units on privately owned and operated individual or communal wells provide the following:**

- (i) a servicing options report; and
- (ii) a hydrological report.

28. If the Plan would permit development of 5 or more lots or units on privately owned and operated individual or communal septic systems provide the following:
- (i) a servicing options report; and
  - (ii) a hydrological report.
29. If the Plan would permit development of fewer than 5 lots or units on privately owned and operated individual or communal septic systems, and more than 4,500 litres of effluent would be produced per day from the development, provide the following reports;
- (i) a servicing options report; and
  - (ii) a hydrological report.
30. If the Plan would permit development of fewer than 5 lots or units on privately owned and operated individual or communal septic systems and 4500 litres of effluent or less would be produced per day as a result of the development being completed, provide a hydrogeological report.
31. Type of access to land(s): (mark with an "X")
- a) Provincial highway ☐
  - b) Year-round municipal road ☐
  - c) Seasonal municipal road ☐
  - d) Private right-of-way ☐
  - e) Water ☐
32. If access to the subject land will be by water only, indicate the parking and docking facilities to be used and the approximate distance of these facilities from the subject land and the nearest public road.
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33. Does the subject land contain any areas of archaeological potential?
- Yes ☐ No ☐
34. If the plan would permit development on land that contains known archaeological resources or areas of archaeological potential provide the following:
- a) an archaeological assessment prepared by a person who holds a licence that is effective with respect to the subject land, issued under Part VI (Conservation of Resources of Archaeological Value) of the *Ontario Heritage Act*; and

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- b) a conservation plan for any archaeological resources identified in the assessment.
- 35.** Are there any existing buildings on the land(s) proposed to be subdivided? If so, are they to be retained, demolished, or otherwise removed?
- 36.** Is this an application for approval of a condominium description?
- Yes ☐ No ☐ If yes, please complete the following
- a) Indicate the type of condominium to be created
- |                             |                          |
|-----------------------------|--------------------------|
| Common Elements Condominium | <input type="checkbox"/> |
| Phased Condominium          | <input type="checkbox"/> |
| Vacant Land Condominium     | <input type="checkbox"/> |
| Leasehold Condominium       | <input type="checkbox"/> |
- b) Has a site plan been approved for the proposed condominium?  
Yes ☐ No ☐
- c) Has a building permit been issued for the proposed condominium?  
Yes ☐ No ☐
- d) Is the proposed condominium presently under construction or has it been completed?  
Under construction ☐; Completed ☐; If completed, Date of completion \_\_\_\_\_
- e) Is the proposed condominium a conversion of a building containing residential rental units?  
Yes ☐ No ☐
- If yes, attach a list showing the following information for each unit:
- i) whether the unit is occupied or vacant
  - ii) the rent
  - iii) the number of bedrooms
- Total number of units in the building: \_\_\_\_\_
- f) Total number of parking spaces shown on the draft plan for detached and semi-detached residential uses: \_\_\_\_\_
- 37.** Is the Plan consistent with the Provincial Policy Statement issued under subsection 3(1) of the Planning Act?
- Yes ☐ No ☐



38. Is the subject land located within an area of land designated under any Provincial Plan(s)?  
Yes ☐ No ☐

39. a) The proposed subdivision must be consistent with the Provincial Policy Statement. Please review the policies carefully to ensure that they are addressed. Special studies or reports may be required to be submitted along with this application in order to allow a proper review. If the necessary studies are not submitted, the application may be deemed incomplete, and the time limits on the approval process as set out by the Planning Act will not apply.

b) Identify any supporting documents/reports being submitted along with this application.

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**DECLARATION**

I, \_\_\_\_\_ of the \_\_\_\_\_

of \_\_\_\_\_, in the County of \_\_\_\_\_, do solemnly declare that all above statements contained in this application and in all of the exhibits submitted herewith are true, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the **CANADA EVIDENCE ACT**.

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**SIGNATURE OF OWNER OR AGENT**

(to be signed in the presence of a Commissioner of Oaths)

Declared before me at the \_\_\_\_\_ of \_\_\_\_\_ in

the County of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_.

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COMMISSIONER, etc.

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**CITY OF SARNIA FEE SCHEDULE**

Application for Subdivision (10 or more units) .....	\$8,418.80
Application for Subdivision (5 - 9 units).....	\$7,196.80
Application for Condominium.....	\$8,418.80
Application for Condominium Conversion .....	\$3,042.00

*The fee payable online, or by credit, debit or cheque payable to: "The Corporation of the City of Sarnia" must accompany each application before it can be processed.*

**ST. CLAIR REGION CONSERVATION AUTHORITY FEE SCHEDULE**

**Confirm required fee with the St. Clair Region Conservation Authority.**

*Please make cheque payable to: St. Clair Region Conservation Authority*

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**THIS SECTION TO BE COMPLETED BY STAFF**

Application Received by the Planning and Building Department for Review:

DATE: \_\_\_\_\_ SIGNATURE OF PLANNER: \_\_\_\_\_

Application Accepted as Complete:

This \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_.

\_\_\_\_\_  
Director of Planning and Building

Revised January, 2023