



Come for a visit. Stay for a lifestyle.

Application for:  
Closing a Road Allowance

**Please submit your completed application to:**

Planning Department  
The Municipality of Trent Hills  
66 Front Street South  
P.O. Box 1030  
Campbellford, Ontario  
K0L 1L0

Tel: (705) 653-1900  
Fax: (705) 653-5203  
E-mail: [planning@trenthills.ca](mailto:planning@trenthills.ca)



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**Application for Closing a Road Allowance**

**Corporation of the Municipality of Trent Hills**

**Application Sections**

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**Complete Applications**

Only complete applications, which includes the appropriate drawings and fees, will be processed. Deficiencies in the application will be noted by staff and must be remedied before the Municipality issues a Notice of Complete Application.

It is the responsibility of the applicant(s) to ensure the accuracy and completeness of the application prior to its submission to this office, to avoid any misunderstandings or delays.

# TRENT HILLS ROAD ALLOWANCE CLOSURE APPLICATION FORM

## 1. Owner/Agent/Developer Contact Information

1.1 Applicant Information	
Name:	Primary Phone No.:
	Alternate Phone No.:
	Fax Number:
Address:	
Email Address:	

1.2 Authorized Agent/Solicitor Information	
Name:	Primary Phone No.:
	Alternate Phone No.:
	Fax Number:
Address:	
Email Address:	

Please specify the person to be contacted about this application:

Owner:  Agent:  Solicitor:

## 2. Date of Application & Application Type

2.1 Purpose of the Application
Type of Application:
Date of Application:

### 3. Applicant's Land Information

3.1 Location of Applicant's Property	
Municipality:	
Geographic Township:	
Concession:	Lot No.:
Registered Plan:	Block/Lot/Part No.:
Name of Street:	Street No.:

3.2 Description of Applicant's Land	
Lot Area:	
Frontage:	Depth:
Existing Use(s):	
Current Zoning Designation:	

3.3 History of Applicant's Land		
Date acquired by Current Owner:		
When were the buildings or structures on the subject lands first built?		
How long have the current uses continued on the property?		
Are there any easements or restrictive covenants on the subject land?		
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unknown <input type="checkbox"/>
If <b>Yes</b> , please describe the covenant/easement and its effect:		

3.4 Previous Uses of Applicant's Land		
Have any of the following uses historically taken place on or adjacent to the Subject Lands? (check any that apply):		
<input type="checkbox"/> Gas Station	<input type="checkbox"/> Industrial Use	<input type="checkbox"/> Orchard
<input type="checkbox"/> Laundromat	<input type="checkbox"/> Dry Cleaner	<input type="checkbox"/> Earth/Soil Infill
<input type="checkbox"/> Other (please specify):		

#### 4. Road Allowance Information

4.1 Location of Road Allowance	
Geographic Township:	
Concession:	Lot:
Registered Plan Description (if applicable):	

4.2 Road Allowance Details	
Dimensions of Road Allowance	Width: _____ Depth: _____
Has the Road Allowance ever been used as a Public Road?	
<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>	
If <b>Yes</b> , please provide details:	
Will the closure of this road allowance prohibit access to any other property?	
<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>	
If <b>Yes</b> , please provide details:	
Are there any easements or restrictive covenants affected this road allowance?	
<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>	
If <b>Yes</b> , please provide details:	
Would the conveyance of the road allowance correct or improve a hardship?	
<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>	
If <b>Yes</b> , please provide details:	
Does the road allowance lead to water?	
<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>	
If <b>Yes</b> , please provide details:	
Are you aware of anyone else using the road allowance?	
<input type="checkbox"/> Yes <span style="margin-left: 200px;"><input type="checkbox"/> No</span>	
If <b>Yes</b> , please provide details:	

4.3 What is the purpose of the application?

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**5. Sketch**

5.1 Please include a sketch, survey plan, or diagram showing the following:

<input type="checkbox"/>	The boundaries and dimensions of the subject land
<input type="checkbox"/>	The approximate location of all natural and artificial features on the subject land and on land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application. (i.e. buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells, and septic systems).
<input type="checkbox"/>	The current uses on land that is adjacent to the subject land.
<input type="checkbox"/>	The location, width, and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road, or a right of way.
<input type="checkbox"/>	If access to the subject land is by water only, the location of parking and docking facilities to be used.
<input type="checkbox"/>	The location and nature of any easement(s) affecting the subject land.

**5.2 Sketch**

If a detailed plan is not attached, a sketch can be included below:

## 6. Significant Features Checklist

6.1 Land use / Features			
Are any of the following uses or features on the subject land or within 500 meters of the subject land? (check appropriate space)			
Use of Feature	Is the Feature within 500m of the Subject Lands?		Distance (m)
An agricultural operation (including abattoir)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Livestock facility or stockyard (animal type and #)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A commercial or industrial use	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A watercourse (i.e. creek, stream, river)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A wetland (i.e. Marsh, swamp, low, seasonally wet areas, or wooded wet areas)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A steep slope	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
An active or abandoned rail line	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A landfill (active or non-operation)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Provincial Park or Crown Lands	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
An active or abandoned mine site (specify)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A rehabilitated mine site	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A noxious industrial site	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A natural gas or petroleum pipeline	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
A sewage treatment plan or waste stabilization	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



**7. Additional Information (Optional)**

7.1 Please include any other information that would support the proposed development:

### 8. Affidavit or Sworn Declaration

NOTE: The declaration must be endorsed, by the applicant(s), before this application will be accepted.

If an agent is acting for you, a letter must be attached authorizing to act on your behalf.

**Declaration**

I/We, \_\_\_\_\_  
of the Municipality of \_\_\_\_\_ in the County  
of \_\_\_\_\_ solemnly declare that all the statements contained in  
this application for a plan of subdivision/condominium and all the supporting document are true  
and that I / We make this solemn declaration conscientiously believing it to be true and  
complete and knowing that is of the same force and effect as it made under oath and virtue of  
the Canada Evidence Act.

Signature of Applicant:	Signature of Applicant:
Printed Name of Applicant:	Printed Name of Applicant:
Date:	Date:
Signature of Benefitting Property Owner:	Signature of Benefitting Property Owner:
Printed Name of Benefitting Property Owner:	Printed Name of Benefitting Property Owner:
Date:	Date:
Signature of Agent:	Signature of Agent:
Printed Name of Agent:	Printed Name of Agent:
Date:	Date:

TRENT HILLS ROAD ALLOWANCE CLOSURE APPLICATION FORM

Declared before me at the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

The information on this form is being collected under the authority of section 4 of the Municipal Freedom of Information and Protection of Privacy Act. This information will be used for the purpose of processing an access request under the Act. Enquiries regarding the collection of this information should be directed to the Office of the Clerk / Freedom of Information Coordinator, Municipality of Trent Hills, 66 Front St. S., Campbellford, Ontario, K0L 1L0, (705) 653-1900.

For office use only
Planning File No.:
Pre-consultation Date:
Date of Receipt of Application:
Date deemed complete:
Hearing Date:
Checked by:
Authorization of Owner Received: Yes [ ] No [ ] N/A [ ]
Date:
Planning Department Representative