



Come for a visit. Stay for a lifestyle.

Application to Close a Municipal 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



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Application to close a Municipal road allowance

Corporation of the Municipality of Trent Hills

Applicant information	
Name:	Home Phone No.
	Work Phone No.
	Fax Number:
Mailing Address: (including Postal Code)	
Email Address:	

Authorized Agent / Solicitor Information	
Name:	Phone No.:
	Fax Number:
Address: (including Postal Code)	
Email Address:	

Please specify the person is to be contacted about this application:

Owner Agent Solicitor

Location of the Applicant(s) property	
Geographic Township: <i>(Percy, Seymour, Campbellford, Hastings)</i>	
Concession:	Lot:
Registered Plan:	Part(s) #
Civic Address:	
Location of the subject road allowance	
Geographic Township: <i>(Percy, Seymour, Campbellford, Hastings)</i>	
Concession:	Lot:
Registered Plan:	Part(s) #
Details	
Dimensions of the subject road allowance:	
Has the road allowance ever been used as a public road:	
<p style="text-align: center;">Yes: <input type="checkbox"/> No: <input type="checkbox"/></p> <p>If yes, please provide details.</p>	
Will the close of this road allowance prohibit access to any other property?	
<p style="text-align: center;">Yes: <input type="checkbox"/> No: <input type="checkbox"/></p> <p>If yes, please provide details.</p>	
Are there any easements or restrictive covenants affecting this road allowance?	
<p style="text-align: center;">Yes: <input type="checkbox"/> No: <input type="checkbox"/></p> <p>If yes, please provide details.</p>	

Does road allowance lead to water?

Yes: No:

Are you aware of anyone else using the road allowance?

Yes: No:

Does the closure relieve a hardship on your property?

Yes: No:

What is the purpose of the application?

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 to close a road allowance and all the supporting
document(s) 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:

Declared before me at the _____ of
 _____ in the County of _____
 this _____ day of _____ 20____.

 A Commissioner, etc.

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:

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Planning Department Representative