



2026

Come for a visit. Stay for a lifestyle.

Application for:

Official Plan Amendment

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



Application for an Official Plan Amendment

Corporation of the Municipality of Trent Hills

Come for a visit. Stay for a lifestyle.

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Complete Applications

Only complete applications, which includes the appropriate drawings, 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.

Sections listed as **Optional** are not required for a complete application. These sections are not required under O. Reg. 543/06 as a part of a complete application for an Official Plan Amendment under the Planning Act. These sections may assist Staff in supporting the proposal and provide additional materials to bring before Council.

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:
Name of the Official Plan to be Amended:
Date of Application:

3. Information of Mortgage Holders, Charges, or Other Encumbrances**3.1 Additional Contact #1 Information (if applicable)****Company Name:**

Name:

Phone No.:

Alternate Phone No.:

Fax No.:

Address:

Email Address:

3.2 Additional Contact #2 Information (if applicable)**Company Name:**

Name:

Primary Phone No.:

Alternate Phone No.:

Fax No.:

Address:

Email Address:

3.3 Additional Contact #3 Information (if applicable)**Company Name:**

Name:

Primary Phone No.:

Alternate Phone No.:

Fax No.:

Address:

Email Address:

4. Subject Land Information**4.1 Location of Subject Land**

Municipality:	Geographic Township:
Concession:	Lot No.:
Registered Plan:	Block/Lot No.:
Name of Street:	Street No.:

4.2 Description of Subject Land

Lot Area:	
Frontage:	Depth:
Existing Use(s):	
Current Zoning Designation:	

4.3 History of Subject 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 Yes , please describe the covenant/easement and its effect:

4.4 Current Applications

Is the Owner or Agent submitting any Zoning By-law Amendment Applications simultaneously with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , file number:
Is the Owner or Agent submitting an Official Plan Amendment Applications simultaneously with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , file number:
Is the Owner or Agent submitting any other Applications simultaneously with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , file number:

4.5 Previous Applications

Has there been a previous Consent, Severance, Plan of Subdivision, or Plan of Condominium to the Subject Lands?

☐ Yes

☐ No

If **Yes**, Application Number:

Status of Application:

Has there been a Previous Zoning By-law Amendment, Minor Variance, or Official Plan Amendment to the Subject Lands?

☐ Yes

☐ No

If **Yes**, Application Number:

Status of Application:

Have there been any other previous applications or Minister's Zoning Orders to the Subject Lands?

☐ Yes

☐ No

If **Yes**, Application Number:

Status of Application:

4.6 Previous Uses of Subject Land

Have any of the following uses historically taken place on or adjacent to the Subject Lands? (check any that apply):

☐ Gas Station

☐ Industrial Use

☐ Orchard

☐ Laundromat

☐ Dry Cleaner

☐ Earth/Soil Infill

☐ Other (please specify):

5. Proposed Amendment(s)**5.1 Official Plan Current Designation**

What is the current designation of the subject lands in the Trent Hills Official Plan?

What is the current designation of the subject lands in the Northumberland County Official Plan?

What land uses are supported by these Official Plan designations?

5.2 Requested Changes

Does the proposed amendment change, replace, or delete a policy in the Official Plan?

☐ Yes

☐ No

If **YES**, what is the policy to be changed in the Official Plan:

Does the requested amendment add a policy to the Official Plan?

☐ Yes

☐ No

If **YES**, what is the policy to be added in the Official Plan:

5.3 Changing or Replacing a Policy

Does the requested amendment change or replace a designation in the Official Plan?

☐ Yes

☐ No

If **YES**, what is the designation to be changed or replaced?

5.4 Purpose of the Amendment

For what purpose is the Official Plan amendment requested?

5.5 Proposed Land Uses

What are the land uses that the requested Official Plan amendment would authorize?

5.6 Changes to Policies

If the requested amendment proposes a change, replacement, or removal of a policy, please provide the text of the requested amendment:

5.7 Proposed Schedule

If the requested amendment proposes to change or replace a schedule in the Official Plan, please provide the accompanying text:

5.8 Settlement Area Expansion or Creation

If the requested proposal is to alter the existing settlement boundaries, or establishes a new area of settlement in a municipality, please list the current Official Plan policies, if any, that deal with the alteration or establishment of an area of settlement:

5.9 Areas of Employment

If the requested amendment removes the subject land from an area of employment, please provide the current Official Plan policies that deal with the removal of land from an area of employment:

6. Servicing and Utilities**6.1 Site Access:**

How will the subject land be accessed?

- | | |
|---|---|
| <input type="checkbox"/> Provincial Highway | <input type="checkbox"/> County Highway |
| <input type="checkbox"/> Municipal Road Maintained Year-round | <input type="checkbox"/> Municipal Road Maintained Seasonally |
| <input type="checkbox"/> Private Lane/Other | <input type="checkbox"/> Water |

If access to the subject land will be by water only, please describe the parking and docking facilities used or to be used by the proposed development, and state the approximate distance these facilities are from the subject land and the nearest public road:

6.2 Water Supply

How will Water be provided to the subject land:

- | | |
|---|---|
| <input type="checkbox"/> Existing Municipal Water | <input type="checkbox"/> Proposed Municipal Water |
| <input type="checkbox"/> Existing Communal Well | <input type="checkbox"/> Proposed Communal Well |
| <input type="checkbox"/> Existing Individual Well | <input type="checkbox"/> Proposed Individual Well |
| <input type="checkbox"/> Existing Lake/Surface Water Source | <input type="checkbox"/> Proposed Lake/Surface Water Source |
| <input type="checkbox"/> Other (Specify): | |

6.3 Sewage Disposal

How will Sewage Disposal be provided to the subject land:

- | | |
|--|--|
| <input type="checkbox"/> Existing Municipal Sewage System | <input type="checkbox"/> Proposed Municipal Sewage System |
| <input type="checkbox"/> Existing Communal Septic System | <input type="checkbox"/> Proposed Communal Septic System |
| <input type="checkbox"/> Existing Individual Septic System | <input type="checkbox"/> Proposed Individual Septic System |
| <input type="checkbox"/> Other (Specify): | |

6.4 Individual or Communal Septic Systems (if applicable)

If the application would permit development on privately owned land and operated individual or communal septic systems that would produce more than **4500** litres of effluent per day as a result of the development, please include the following attached studies:

- | | |
|---|---|
| <input type="checkbox"/> A Servicing Options Report | <input type="checkbox"/> A Hydrogeological Report |
|---|---|

6.5 Stormwater Management

How will stormwater be managed on the subject lands?

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Storm Sewers | <input type="checkbox"/> Ditches |
| <input type="checkbox"/> Swales | <input type="checkbox"/> Other (Specify): |

7. Cultural Heritage Significance (Optional)**7.1 Do the subject lands contain any areas of archaeological potential?**

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

7.2 If the subject lands contain known archaeological resources or areas of archaeology potential, the following are required:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | An archaeological assessment prepared by a person who holds a license that is effective with respect to the subject land, issued under Part VI of the Ontario Heritage Act; |
| <input type="checkbox"/> | A Conservation Plan for any archaeological resources identified in the assessment; and |
| <input type="checkbox"/> | Any other studies/resources as requested by the Municipality. |

7.3 Are there any structures that the Municipality has deemed to be of cultural or historic significance on or adjacent to the subject lands?

- | | | |
|---|--|-----------------------------|
| <input type="checkbox"/> Yes, Subject Lands | <input type="checkbox"/> Yes, Adjacent Lands | <input type="checkbox"/> No |
|---|--|-----------------------------|

7.4 If **Yes, is the structure a Designated Heritage building, or is listed on the Municipality's Heritage Registry under the Ontario Heritage Act?**

- | | |
|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Designated | <input type="checkbox"/> Listed |
|-------------------------------------|---------------------------------|

8. Provincial Policy

8.1 Conformity with Provincial Policy Statements

List of relevant plans which the proposed development must adhere to:

- | | |
|---|--|
| <input type="checkbox"/> Provincial Planning Statement, 2024 | <input type="checkbox"/> County of Northumberland Official Plan |
| <input type="checkbox"/> Oak Ridges Moraine Conservation Plan, 2017 (if applicable) | <input type="checkbox"/> Municipality of Trent Hills Official Plan |
| <input type="checkbox"/> Other (specify): | |

Is the proposed plan consistent with any and all policy statements issued under subsection 3(1) of the Planning Act?

☐ Yes

☐ No

Please explain how the plan is consistent with the subsection listed above:

Is the subject land within an area designed under any provincial plan(s)?

☐ Yes

☐ No

If **Yes**, please explain how the proposed development conforms or does not conflict with provincial plan(s)?

9. Sketch

9.1 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 location, size, and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the Front yard lot line, Rear yard lot line, and Side yard lot lines.
<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.

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

10. Significant Features Checklist

10.1 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 plant or waste stabilization	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

11.Additional Information (Optional)

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

12. Public Consultation Strategy**12.1 Please include any strategies or methods for consulting with the public in respect to the application.**

As per O. Reg. 543/06, as amended, a strategy for consulting with the public is required to be submitted by the proponent of a Official Plan Amendment application before it can be deemed complete as defined by the Planning Act.

The Planning Act requires that your application be circulated to property owners within 120 m of the subject lands; a notice sign be posted on the property and a Public Meeting be held regarding the proposal.

Please select any and all forms of further public consultation that you, as the applicant / agent / owner intend to undertake, if any, beyond the formal notification requirements of the Planning Act outlined above.

a) Public Hearing(s)	<input checked="" type="checkbox"/>
b) Open House	<input type="checkbox"/>
c) Workshops/Charrettes	<input type="checkbox"/>
d) Surveys/Questionnaires	<input type="checkbox"/>
e) Other (Specify):	<input type="checkbox"/>

12.2 Please include any other information or requests related to public consultation and engagement in respect to the application:

Empty space for additional information
--

13. 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 OFFICIAL PLAN AMENDMENT APPLICATION FORM

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:

- Commissioner's Seal-

.....

Planning Department Representative