



Town of South Bruce Peninsula
 PO Box 310, 315 George Street, Warton ON N0H 2T0
 Phone 519-534-1400 Toll Free 1-877-534-1400 Fax 519-534-4862

Holding Symbol Removal Request

Please submit a complete application including the application form, fee and a detailed site plan.

Owner /Property Information

Legal Owner(s) Name	
Mailing Address	
Phone Number(s)	
Municipal Address	
Legal Description	
Roll Number	

Applicant/Agent Information (if different from the owner)

Applicant/Agent Name	
Mailing Address	
Phone Number(s)	

Zoning

Legal Description of Lot	Access Road Name	Zoning

Current and Proposed Use of Lot (cottage, residence, vacant, business, etc.)

Legal Description of Lot	Lot Use

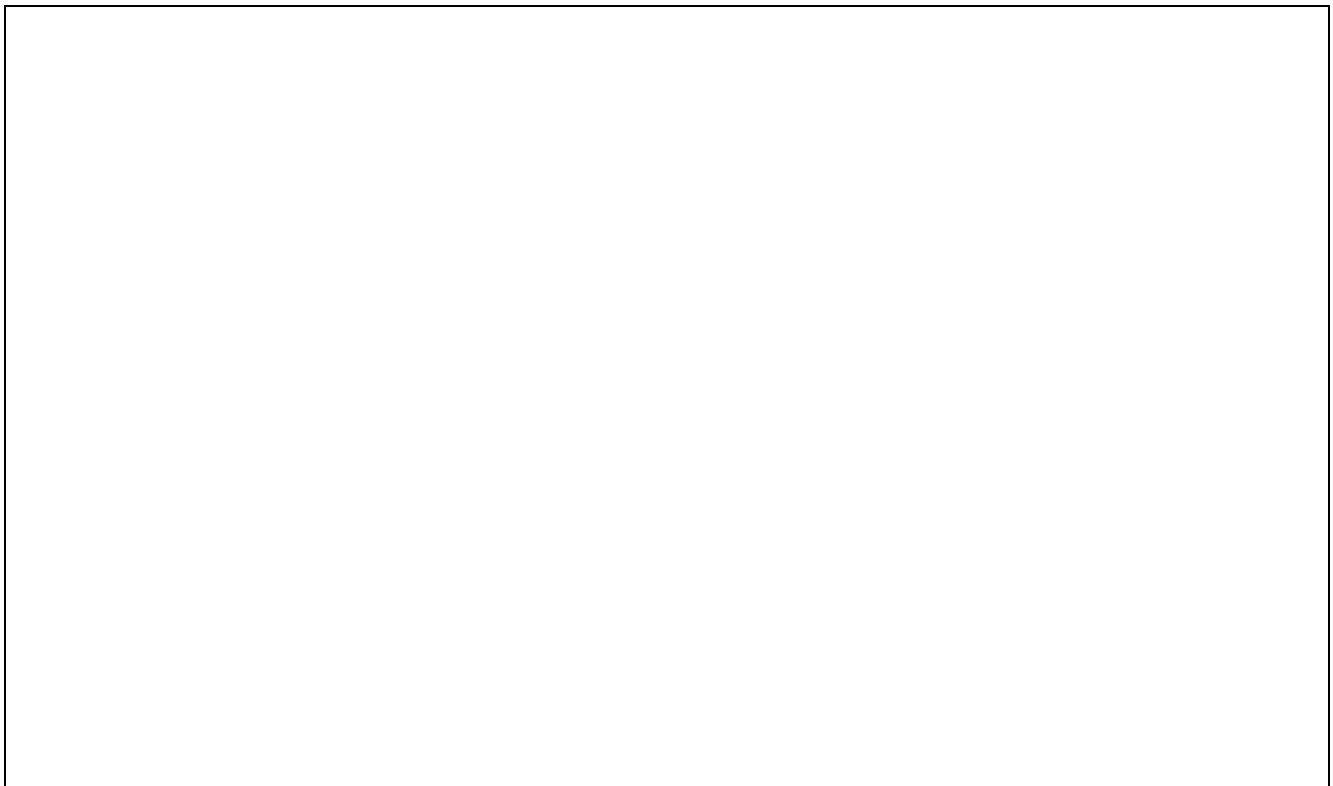
Reason for Request for Removal of Holding Symbol

The request is being made for the following reason(s):

Site Plan

Note: Please ensure that the items below appear on the site plan. Additional detail may be supplied on a separate sheet of paper if required.

- Width of road allowance
- Name of street
- Frontage of lot on the street
- Depth of lot
- All dimensions if irregular shape
- Location of driveway and parking
- Current buildings or improvements to the property
- Size of proposed building or addition (All dimensions and height profile)
- Location of proposed or existing building in relation to all lot lines (setbacks)
- North to be indicated



Declaration of Registered Owner(s)

I/we _____ do hereby
(print owner(s) name(s))
make oath and say that the information contained in this application for holding
symbol removal is true to the best of my/our knowledge.

Date

Signature of Owner

Date

Signature of Owner

Date

Signature of Owner

Declaration of Owner and Applicant/Agent (if an agent is appointed)

I/we _____ do hereby
(print owner(s) name(s))
make oath and say that I/we have appointed _____
(print applicant/agent(s) name(s))
to act as an applicant/agent on my/our behalf with respect to this application for
holding symbol removal. I/we acknowledge that the Town will correspond with
the appointed person(s) named above with respect to this application.

Date

Signature of Owner

Date

Signature of Owner

Date

Signature of Owner

I/we _____ do hereby
(print applicant/agent(s) name(s))
make oath and say that I/we act on behalf of the registered owner(s) with respect
to this application for holding symbol removal. I/we acknowledge that the Town
will correspond with me/us with respect to this application. I/we acknowledge
that the Town reserves the right to make contact with the registered owner(s) at
any time with respect to this application.

Date

Signature of Applicant/Agent

Date

Signature of Applicant/Agent