



## Site Plan Pre-Consultation Application Form

Development Planning Section  
Community Development Department  
50 Dickson Street, 3<sup>rd</sup> Floor, P.O. Box 669  
Cambridge, Ontario N1R 5W8  
Tel: 519-623-1340  
TTY: 519-623-6691

**Pre-consultation is required** for the construction of a new building(s) and major building expansions prior to submission of a formal complete site plan application unless determined by City Planning Staff. The meeting schedule can be found on the last page of the application package.

### CHECKLIST FOR THE APPLICANT

- One (1) original and one (1) hard copy** of the completed application form;
- Six (6) hard copies** of all drawings, **folded and collated 24" x 36"** (for properties fronting onto Local Roads)
- Eight (8) hard copies** of all drawings, **folded and collated 24" x 36"** (for properties fronting onto Regional Roads)
- The application fee as indicated in the fee schedule (no fee is required for Core Area projects)
- One (1) hard copy** of the Cover Letter (brief overview of the proposal)
- A completed and signed Sanitary Sewer Servicing Capacity Analysis and fee\*;
- A completed and signed Acknowledgement and Permission to Enter Property Form;
- A completed and signed Authorization of Owner(s) for Agent to Make the Application Form;
- A completed Notice of Source Protection Plan Compliance (Section 59 Notice);
- A digital copy of all plans, drawings, and supportive materials on either a USB drive or CD.

## **NOTE TO APPLICANTS:**

**\*Sanitary Sewer Capacity Assessment:** All development proposals for the development of 5 or more units for commercial, industrial, or institutional development must complete a Sanitary Sewer Capacity Assessment form and pay the associated fee. The form is attached to this application.

Submission of this application constitutes consent for authorized municipal staff and committee members to inspect the subject land.

## **COMPLETENESS OF THE APPLICATION:**

The information requested for this application must be provided by the applicant. If the information, including copies of the required plans and the applicable fees are not provided, the City may return the application or refuse to consider the application further until receipt of all the required information and fees have been provided.

## **USING THE APPLICATION FORM:**

This application form must be completed by the owner or the owner(s) authorized agent. Where an agent makes the application, the owner(s) written authorization is required. If more than one person owns the subject lands, the authorization of all owners is required.

It is the responsibility of the applicant to research and evaluate the site and the proposal to ensure that the development will conform to the interests of the health, safety and welfare of the public.

## **HELP:**

If you require assistance in completing this application form, please call the City of Cambridge Community Development Department, Development Planning Section at 519-623-1340 and ask to speak to a planner.

## **Notes:**

- Page 9 of the Application Form includes several declarations and authorizations that **MUST** be signed by the owner of the “subject lands” to which this application applies. If there is more than ONE owner, an additional copy of Page 9 must be completed and attached to the application for each additional owner.
- Planning fees can be obtained by visiting the City’s Website at <https://www.cambridge.ca/en/build-invest-grow/Planning-Process.aspx>



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City use only

Date received:	Date accepted:	Fee paid:	File No.
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**Is this a resubmission of an earlier application?**

Yes (File No. \_\_\_\_\_)       No       Unknown

**Please briefly describe the proposal:**

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**Please indicate the type of site plan application you will be applying for:**

Commercial <input type="checkbox"/>	Residential <input type="checkbox"/>	Industrial <input type="checkbox"/>	Institutional <input type="checkbox"/>	Mixed-use <input type="checkbox"/>
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## 1.0 General Information

Municipal Address: \_\_\_\_\_

Lot: \_\_\_\_\_ Concession: \_\_\_\_\_

Registered Plan No. \_\_\_\_\_ Lot(s): \_\_\_\_\_

Reference Plan No. \_\_\_\_\_ Part(s): \_\_\_\_\_

Have there been any previous pre-consultation or development applications submitted for the subject property?      Yes      No  
     

File No. \_\_\_\_\_ Date assigned: \_\_\_\_\_

**1.1 Registered Owner\* (Applicant)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext. \_\_\_\_\_  
Email: (required): \_\_\_\_\_

\*If a numbered company, also give the name and address of the principal owner. If more than one owner, complete an additional page for each owner

**1.2 Agent or Consultant**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext. \_\_\_\_\_  
Email (required): \_\_\_\_\_

**1.3 Primary Contact**

All contact with the City of Cambridge regarding this application will go through a single point person. Please indicate who the primary point of contact is:

Registered Owner  Agent/Consultant

**1.4 All Persons or Institutions who have Mortgage Charge or Encumbrance on the Subject Property**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext. \_\_\_\_\_  
Email: (required): \_\_\_\_\_

2.0 Particulars of Property		
Frontage (m):	Depth (m):	Area (m <sup>2</sup> ):

3.0. Existing Conditions	
Existing use of the Property:	
Existing Zoning:	
Designation in City of Cambridge Official Plan: _____	
Designation in Region of Waterloo Official Plan: _____	
Are there any existing natural features on site or adjacent to the site (trees, streams, steep slopes, wetlands, etc.)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If <b>yes</b> , please identify:	
Are there any existing municipal services (i.e. water/sanitary) on the site? If privately serviced, please specify servicing arrangements (i.e. septic tank and well water). If <b>yes</b> , please show the details such as size and location	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there any buildings on or adjacent to the subject land that are designated under the Ontario Heritage Act or listed on the City's Heritage Register? If <b>yes</b> , please explain: _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the site located on a Regional Road? If <b>yes</b> , the Owner will be required to obtain a Regional Access permit approval and clearance prior to Site Plan Approval	Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>3.0 Existing Conditions (Continued)</b>	
Does the subject land contain any areas of archaeological potential?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there any significant wetlands as designated in the City of Cambridge or Regional Official Plan located on the subject property or within 120 metres of the subject property?	Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
<p>Is the subject site located within:</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> 70 metres of a Class I industry?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> 300 metres of a Class II industry?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> 1000 metres of a Class III industry?</p> <p>Class I industry – Small scale, self-contained plant, no outside storage, low probability of fugitive emissions and daytime operations only</p> <p>Class II industry – Medium scale processing and manufacturing with outdoor storage, periodic output of emissions, shift operations and daytime truck traffic</p> <p>Class III industry – Processing and manufacturing with frequent and intense off-site impacts and a high probability of fugitive emissions</p>	
Is the site regulated by the Grand River Conservation Authority? If <b>yes</b> , the Owner is responsible for obtaining all necessary clearances.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the site a known or suspected contaminated site?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have any environmental site contamination studies been completed? (i.e. Phase 1, 2010, Phase 2, 2012)? If <b>yes</b> , please explain:  _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has a Record of Site Condition been filed with the Ministry of the Environment Conservation and Parks?	Yes <input type="checkbox"/> No <input type="checkbox"/>

#### 4.0 Source Water Protection Area

Is the subject site located within a Source Water Protection Area? Please see the [Region's TAPS Website](#); to confirm.

Yes  No

If **yes**, has the following information been provided?

Notice of Source Protection Plan Compliance (Section 59 Notice)

**Applicants are responsible for ensuring the completeness of their application and that source water protection requirements are met under the Clean Water Act; and that despite any review of the application by the City, the City does not accept any liability for the information provided or warrant that the Clean Water Act requirements have been met.**

#### 5.0 Proposed Development

Proposed Use: \_\_\_\_\_

Number of Proposed Buildings: \_\_\_\_\_

Proposed Buildings	Approximate Area (m <sup>2</sup> )	Building Height	No. of Storeys	No. of Units	Use of Building Units
Building 1					
Building 2					
Building 3					
Building 4					

**Total Proposed Building Area:** \_\_\_\_\_

No. of Parking Spaces: \_\_\_\_\_

No. of Loading Spaces: \_\_\_\_\_

No. of Barrier Free Parking Spaces: \_\_\_\_\_

No. of Bicycle Parking Spaces: \_\_\_\_\_

## 6.0 Affordable Housing

a) Is this application for an **affordable ownership**\* housing project? Yes  No

b) Is this application for an **affordable rental**\* housing project? Yes  No

If **yes**, to either a) or b) please contact the Senior Planner – Reurbanization to confirm eligibility for the City of Cambridge’s Affordable Housing Community Improvement Plan program.

**Note:** Eligible affordable housing projects are exempt from development application, building permit and sign fees. Projects may be eligible for deferral of development charges and Tax Increment Grants.

\*in accordance with Canada’s Mortgage and Housing Corporation’s current rental or ownership rates

## 7.0 Related Planning Applications

Has the subject land ever been the subject of a previous application under the Planning Act, such as for a Plan of Subdivision, Consent, Site Plan, Official Plan, or Zoning By-law Amendment?

Yes  No

If **yes**, and if known, indicate the file number, the date of the application and the status of the application: \_\_\_\_\_

\_\_\_\_\_

Has the subject land ever been the subject of a Minister’s Zoning Order?

Yes  No

If **yes**, and if known, indicate the Ontario Regulation number of that order: \_\_\_\_\_

\_\_\_\_\_



## 8.0 Planning Compliance

Does the development conform to the Zoning By-law?

Yes  No

If **no**, please attach an explanation.

## 9.0 Other Information

Is there any other information that may be useful to the Region, public bodies or other agencies in reviewing this application (i.e. efforts made to resolve outstanding objections or concerns)? If so, please explain below or attach on a separate sheet.

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## Completeness of Application

I/we understand that receipt of this application by the City of Cambridge does not guarantee it to be a 'complete' application. Further review of the application will be undertaken and I/we may be contacted to provide additional information and/or resolve any discrepancies or issues with the application as submitted. Once the application is deemed to be fully complete, the application fee will be deposited and the application will be processed.

## Reproduction and Distribution of Documents

The applicant/owner grants the City of Cambridge permission to reproduce, in whole or in part, any document submitted as part of a complete application for internal use, inclusion in staff reports or distribution to the public either online or through other means (such as email) for the purpose of application review.

If the applicant believes there may be a security risk by allowing the public to view any portion of their submission, they must provide documentation to support their concerns and indicate the sensitive documents. The Deputy City Manager of Community Development (or designate) will consider any concerns and may agree to restrict reproduction of applicable documents for internal use or public distribution.

**Acknowledgement and Permission to Enter Property**

Submission of this application constitutes consent for authorized staff and committee members of the Corporation of the City of Cambridge to enter upon the subject land and premises during normal business hours for the purpose of conducting site visits, including photographs, which are necessary for evaluating the merits of this application. Should there be a need for the accompanying of staff or a committee member on a site inspection due to the operations of the business (security/health and safety), please confirm this by checking the box below and indicating who to arrange a site visit with.

- City Staff and committee members are permitted to enter the property.
- Due to security/health and safety reasons City Staff will need to be accompanied while on site by trained personnel. To schedule a site visit please contact the agent/owner.

\_\_\_\_\_  
Signature of Agent/Owner

\_\_\_\_\_  
Date

**Affidavit or sworn declaration:**

I, \_\_\_\_\_ of the \_\_\_\_\_  
(Name of Owner) (City/Town or Township)

in the \_\_\_\_\_  
(Region or County)

make oath and say (or solemnly declare) that the information contained in this application is true and accurate, the information contained in the documents that accompany this application is true and that the owner as of the day on which this application is made has unconditional ownership of the subject lands and has disclosed any agreements or encumbrances that apply to the subject lands.

\_\_\_\_\_  
Signature of Owner

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**Authorization of Owner(s) for Agent to Make the Application**

If the applicant is not the owner of the subject land, the written authorization of the owner that the agent is authorized to make the application must be completed by the owner.

I, \_\_\_\_\_, am the owner of the land that is the subject of this application, and I authorize \_\_\_\_\_ to make this application on my behalf.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

The personal information contained on this form is collected pursuant to the Planning Act, R.S.O. 1990, Chapter 13, as amended. This information is required in order to process this development application and forms part of the public record. If you have any questions on the gathering of personal information, please contact the City's Deputy City Clerk/Manager of Information Management and Archives, who can be reached through the Clerk's Division of Corporate Services Department at 519-623-1340, ext. 4583.

## Fee Schedule

Please list all fees that apply to your application submission. The current fee schedule for applications can be accessed at <https://www.cambridge.ca/en/build-invest-grow/Planning-Process.aspx> .

<b>Pre-consultation fee</b>	\$ _____
<b>Sanitary Sewer Capacity Analysis fee</b>	\$ _____
	<b>Total \$</b> _____

Accepted methods of payment for fees include: cash, debit card, credit card, and personal or company cheques. All cheques should be made payable to the Corporation of the City of Cambridge. Debit card and credit card payments must be made in person at the Community Development counter, 3rd floor, 50 Dickson Street, Cambridge, ON. Please note additional service charges may apply to credit card payments.

**Sanitary Sewer Capacity Assessment Application**  
**City of Cambridge, Community Development Department**

**Submit to:**

Senior Civil Engineering Technologist II, Community Development Department, City of Cambridge, 50 Dickson Street, 3rd floor. PO Box 669, Cambridge ON N1R 5W8  
 Huckabones@cambridge.ca  
 Tel: (519)623-1340 ext. 4304

Application Date: \_\_\_\_\_

Property:

Municipal Address of the Development: \_\_\_\_\_

Current Zoning Classification/ Land use: \_\_\_\_\_

Existing Number of Total Units: \_\_\_\_\_

Type of Proposed Development:

<input type="checkbox"/> Residential	<input type="checkbox"/> Industrial
<input type="checkbox"/> Single Detached Residential	<input type="checkbox"/> Commercial
<input type="checkbox"/> Semi-Detached Residential	<input type="checkbox"/> Institutional
<input type="checkbox"/> Multi Residential (town, apartments)	<input type="checkbox"/> Other (please specify)

Number of proposed units (if residential): \_\_\_\_\_

Peak flow (L/sec): \_\_\_\_\_

Average Flow (L/sec): \_\_\_\_\_

Projected completion date: \_\_\_\_\_

Applicant:

Name:

Corporation or partnership:

Address:

Telephone number:

E-mail:

Applicant's Engineer/Consultant:

Name:

Corporation or partnership:

Address:

Telephone number:

E-mail:

Owner (if different from the applicant):

Name:

Corporation or partnership:

Address:

Telephone number:

E-mail:

**CONDITIONS:**

The applicant acknowledges and agrees that;

- 1) The application for sanitary sewer capacity assessment is required for all new developments within City limits, exemptions will be at the discretion of Community Development staff.
- 2) This application form is not a permit to connect the sanitary service to the City of Cambridge sanitary network, and is not a building permit.
- 3) In situations where the capacity seems to be available to service the project in question, the future capacity can neither be guaranteed nor reserved beyond the established time lines as specified by the City.
- 4) The result of the Sanitary Sewer Capacity Assessment is a preliminary expression of whether the proposed development can be supported by the current sanitary system. Should the development proceed, the City Engineer or his or her representative, reserve the right to;
  - a) Certify the availability or constraints with regards to current capacity within downstream pipe system including immediate network and conveyance network to accommodate the anticipated flows, as the case may be.
  - b) Ask for completion of offsetting sewer improvement to the City's system if feasible, only when requested by the owner and will be his/her sole cost.
  - c) Withdraw the confirmation if the scope and/or the calculations of the sewage flow referenced herein are revised.

**DECLARATION OF APPLICANT:**

I, \_\_\_\_\_ acknowledge that;

- 1) The information contained in this application, attached schedules, attached plans, documentation and other additional information is true to the best of my knowledge.
- 2) If the application is a corporation or partnerships, I have the authority to bind the corporation.
- 3) The submission of this form by the Owner, in the capacity of legal representative of the owner and/ or the developer of the parcel of property, places no obligation on the City of Cambridge, its officers, employees, agents and assigns, to issue a building permit, conditional or otherwise.
- 4) Any misrepresentation in this application or failure to provide new, revised or updated information regarding the estimated sewage flow/ number of units, or subsequent violation of the condition of the capacity assessment process, will result in revocation of the capacity assessment and other remedies in equality and law for the improper filing of the document.

\_\_\_\_\_  
Owner's Signature

## SANITARY SEWER CAPACITY ASSESSMENT RESULTS

<b>Result of analysis done by Community Development staff indicates the following, subject to the notes set out below:</b>	
<input type="checkbox"/>	Capacity is available for current loadings and will be held in reserve until _____
<input type="checkbox"/>	Capacity may be available, pending _____
<input type="checkbox"/>	Capacity is not available, until _____
<input type="checkbox"/>	Capacity is <b>not</b> available.
<div style="border-top: 1px solid black; margin-top: 10px;">                 Signature of: Community Development Official   <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>_____</span> <span>_____ Date of issuance</span> </div> </div>	

**NOTES:**

- The above results for Sanitary Sewer Capacity Assessment shall be valid for one (1 yr) from the date of issuance of assessment, unless otherwise specified herein.
- The City may reserve the capacity for all approved draft plans of subdivision until it lapses at the expiration of the time period of approval as specified by the approval authority (i.e. Region of Waterloo).
- If the City of Cambridge has approved a Site Plan of this property, the allocated capacity for this project shall be held in reserve for a maximum of three (3) years from the date of issuance if the development has not commenced.
- If the results above indicate that capacity is available, the future capacity can neither be guaranteed nor reserved beyond the specified timelines herein.
- If the development is not able to use the allocated capacity within the stipulated time limits, the City reserves the right to re-allocate the capacity to another development.
- City takes no responsibility for the assessment results if the nature of the application changes significantly.
- If the capacity allocated for this project pursuant to the above result is re-allocated by the City, and the applicant or owner wishes to apply for a subsequent capacity assessment, the Applicant or Owner shall submit a new application with current information and comply with all of the application requirements, including payment of applicable fees.