Application for Amendment



Township Centre Wellington 1 MacDonald Square PO Box 10, Elora, ON NOB 1S0 Tel: (519) 846-9691 Fax: (519) 846-2190

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to	the	O.	ffic	ci	al	P		a	n								
under 7	The Planning	Act. R	.S.O. 1	990	c.P.13,	as a	ame	ende	ed								

	Data Oak wille	at.	Date Application	File No. 0002-25
TH	TE AMENDMENT Date Submitte	a: 0.2:5	Deemed Complete:	
1.	Typé of Amendment dd mm y Official Plan □ Other (please specify):	ууу	dd mm yyyy	
2.	Name of the Official Plan requested to be Township of Centre Tergus Secondam Plan	Wellington offic	ial Pland à	Northwest
3.	Purpose of and reason(s) for the propose		report.	
GE	ENERAL INFORMATION			
4.	Applicant Information			
٠.	Registered Owners Name(s):	a 1 Tribute Bruba	eher Holdings	Inc.
	Address 3700 Steles	tve west , Suite &	2007	
	E-mail address	a . com		
	Tel. No. Home		-6154 Fax	
	Applicant (Agent) Name(s): Herth			
	Address <u>Same as all</u>	DOVE TAKE TO F CO	50-6154 Fax	
	Tel. No. Home	~		
	Name, address and phone number of all per	sons having any mortgages, c	harges or encumbrances	on the property:
	Send correspondence to: ☐ Owner	Agent 🗆 O	ther	,
	When did the current owner acquire the sub	ject land? Date:	007	
5.	What area does the amendment cover? ■ the "entire" property □ a "portion" of the property (this information should be illustrated on the require	ed drawing under item 24 of this applica	ntion)	
6.		perty:		
	Municipal Address <u>6586 Black</u>	thy Line		
	Concession		egistered Plan No	
	Area 43.12 ha Depth 388	3.10 m Frontage <u>30</u> 13 ft <u>98</u>	m ft	
7.	Provide a description of the area to be ar			
	Area ha Depth ac	m Frontage ft	m ft	

8.	Is the requeste ☐ Yes	d amendmen □ No	t consistent wi	th the Provi	ncial Policy Sta	tement?	五寶寶賞		医水囊医脱氧霉素 医自分分泌
9.	Is the subject la ☐ Greenbelt F		area of land de	_		cial plan or p er (please specify)			
	If yes, does the	application co	nform to and not	t conflict with	the applicable p	rovincial plan	or plans? □	Yes	□ No
10.	What is the cur				ubject Property?				
11.	List the land us	ses that are p	ermitted by the	current Off	ficial Plan desig	nation			
	If the applicati settlement, pr	ovide details o	of the official plan	n or official p	indary of an area lan amendment γνη (ου	that deals with	the matter.		a of
	If the applicati that deals with		ve land from an a	area of empl	oyment, provide	details of the c	official plan or o	fficial plan a	amendment
ΕX	(ISTING AND	PROPOSE	D SERVICES)					
	Indicate the ap				osal:				
	a) Existing b) Proposed	Municipal Water ☑	Communal Water □	Private Well □	Other Water Supply	Municipal Sewers	Communal Sewers	Private Septic □	Other Sewage Disposal
13.	If the application would more that				ely owned and c er day as a resu				
	If yes, the follow	ving reports are	e required:						
		options report	;; and						

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Car II											
14.	Does the proposed Offici	al Plan Ar	nendment (do the fo	llowing?						
	Change a policy in the Offic	ial Plan		□ Yes	No	☐ Unkno	wn				
	Replace a policy in the Offic	cial Plan		□ Yes	s ⊠ No	□ Unkno	wn				
	Delete a policy in the Official	al Plan		☐ Yes	s ⊡ ∕No	☐ Unkno	wn				
	Add a policy in the Official	Plan		☑ Yes	i □ No	☐ Unkno	wn				
	Add or Change a designation	on in the O	fficial Plan	Yes	; □ No	□ Unkno	wn				
15.	As applicable provide the	e following	g:								
	a) Section Number(s) of F	-									
	b) Text of the proposed n										
	(Note: The Planning Act re the requested schedule an	quires that i d the text th	if the requeste at accompan	ed amendr ies it <u>must</u>	be provided	<u>d</u>)		le in the official plan			
	c) New Designation Name					Green	,				
	d) Map of Proposed new]			
	e) The land uses that the requested official plan amendment would authorize <u>PSI dINFUL 4 (WE GRENI NAC).</u>										
ОТ	HER RELATED PLAN	INING A	PPLICAT	IONS							
16.	Has the current owner (o					n for any o	of the follo	owing, either on o	or within 120 metres		
	of the subject lands? (Ple	ease use a	separate si	File	cessary) Approval Authority	Subject Lands	Status	Purpose	Effect on the requested amendment		
	Official Plan Amendment	Yes	□ No _								
	Zoning By-law Amendment	Yes	□ No _								
	Minor Variance	☐ Yes	□ No _								
	Plan of Subdivision	Yes	□ No Ĉ	13T	-1400	53 S	ept 6	th 2019 (extended ects	. <u>J</u>	
	Consent (Severance)	☐ Yes	□ No _								
	Site Plan Control	☐ Yes	□ No								
17.	Has the subject land even	r been the	subject of	a Minist	er's Zonir	g Order?					
	If yes, provide the Ontario	Regulatior	n number of	that orde	r, if known	•					
	THE CHIPDOPTING IN		TION								

OTHER SUPPORTING INFORMATION

18.	Please list the titles of any supporting documents: (e.g. Environmental Impacts Study, Hydrogeological Report, Servicing Options Report, Traffic
	Study, Market Area Study, Aggregate Licence Report, Stormwater Management Report, etc.)
	Environmental Impact Study, hydro a goo tech, truffic impact study
	preliminary cervicing a strimulater management while, pranning
	Tustification, OPA almoraments, lands needs assessment water orlance

Extrans Williams for An

AUTHORIZATION FOR AGENT/SOLICITOR TO ACT FOR	OWNER . TO THE STATE OF THE STA
(If affidavit is signed by an Agent/Solicitor on Owner's behalf, the Owner's written authorization	
I (We) Surbara Tribute Brubacher Holdings	Inc of the Joun of Centre, of
County/Region of Wellingto	do hereby authorize
Hershand Siva. 1 to act as my agent in	n this application.
43/	Jan 30th. 2025
Signature of Owner(s)	Pate Pate
AFFIDAVIT I (we) SIVN Centre Wellington County/Region of Wellington statements contained in this application are true, and I, (we), make this so knowing that it is of the same force and effect as if made under oath and IDECLARED before me at the of the county/Region of	elemn declaration conscientiously believing it to be true, and by virtue of the CANADA EVIDENCE ACT.
D. Hella	Jun 30 - 2025 Date Date

Application fee of \$ received by the municipality:	Application deemed complete:
Chenfelle Palsa	Chellen
Signature of Municipal Employee	Signature of Municipal Employee
March 21/26	Date 26/28
24.0	