

Statutory Declaration

I _____ of the _____
Name _____ City, Town, Municipality _____
in the _____
County, Region or District _____

make oath and solemnly declare that the information contained in this application is true, and that the information contained in the documents that accompany this application in respect of the above sections is true.

Sworn or declared before me:

at the: _____

in the: _____

this _____ day of _____, 20 _____

Commissioner of Oaths

Applicant or Authorized Agent

Other Fees Associated with the Application

In addition to the application fee, where the City requires assistance from its solicitors or other technical or professional consultants in the processing of this application, the applicant shall be responsible for reimbursing all legal and consulting fees incurred by the City, at the City's actual cost. Depending on the anticipated extent of such fees, the City may also require the applicant to enter into an agreement with respect to the payment of such fees and may, where appropriate, require security to be posted.

I, _____ (the owner) acknowledge that I will pay all legal/ engineering/ planning expenses the City incurs as outlined above.

Signature of Owner

Date

The applicant is hereby notified that in the event the City of Stratford Committee of Adjustment approves the application and the matter is appealed to the Ontario Land Tribunal, the applicant may be required to enter into a financial agreement to bear all legal and consulting costs incurred by the City with regard to its preparation for and attendance at such hearings, including all prehearing conferences and all hearing related matters.

*If applicable, please complete the authorization below for an agent to act on behalf of the owner of the subject land.

Authorization of Owner for Agent to Make the Application

If the applicant is not the owner of the land, this section must be completed, providing written authorization from the owner.

I, _____ am the owner of the land that is the subject of this consent application, and I hereby authorize _____ to make this application on my behalf and to act as my agent in matters related to this application.

Signature of Owner

Date

Authorization for Access

I hereby authorize City of Stratford staff to access the subject site for the purpose of evaluating this application.

Signature of Owner

Date

Notice of Collection

The personal information collected on this form is collected under the authority of the *Planning Act* and will be used by City staff and authorized agents for the purpose of processing this application. All names, addresses and comments will be included in material available to the public and City Council. Questions about the collection and use of this information may be made to the City Clerk, P.O. Box 818, Stratford, ON, N5A 6W1 or by telephone 519-271-0250 ext. 5329 during business hours.

If you require this form in an alternate format, contact the Building and Planning Department at 519-271-0250 extension 5345.