

## Shoreline Permit Requirements

### Class 1, Class 2 & Class 3 (Standard) Permit Applications

The following information is required at submission. Complete submissions can be processed within 10-45 business days (+/- staff variation time required) depending on the scope of work.

#### Shoreline Permit Application Package

1. **Completed shoreline permit application** consisting of:

Digital Application for a "Shoreline Permit"

"Owner's Authorization for Agent or Applicant to Make an Application" (if applicable)

2. **One (1) digital copy or One (1) hard copy** of site plan(s) and all other required plans, reports and specifications drawn to scale which must include:

**Site Plan** showing:

Property Lines, Setbacks & Dimensions of lot

Water's edge at 219.15m elevation

Existing and proposed construction and the dimensions of each

Setbacks to the property lines and any other buildings on the property

Lot grading plan (if applicable)

Development Standards Summary

Location of existing vegetation (ie: trees)

**Please Note:** one (1) site plan can be provided if both existing and proposed work/structures can be made legible. If not, please provide two (2) separate site plans (one for proposed work/structures and the other for existing work and/or structures).

3. **Permit Fee:**

Permit Type	Fee payable to the Town of Innisfil	Fee Payable to LSRCA
Class 3 (standard – meets By-Law)	\$381.10	\$765.00*
Class 2 (Staff Variation)	\$1,030.00	\$1,734.00*
Class 1 (Council Variation)	\$2,544.10	\$5,183.00*

\*LSRCA fees are required to be paid to LSRCA at the time of submitting a complete application to the Town. LSRCA may require additional review fees based on the scope of the work proposed.

#### Building Permit Issuance (if required)

1. The applicant will be contacted and informed of any action required in order for the permit to be issued.
2. Permit fees are payable upon issuance.



## SHORELINE PERMIT APPLICATION

The undersigned hereby applies to the Town of Innisfil to consider this Community Planning Permit Application pursuant to Section 34 of the Planning Act, R.S.O. 1990, as amended and O. Reg. 173/16.

FOR OFFICE USE ONLY		
Shoreline Permit #:		Date Received:
LSRCA fees collected: <input type="checkbox"/> Yes <input type="checkbox"/> No		Receipt #:
<input type="checkbox"/> <b>Class 3 (Standard)</b> (Conforms to CPPS By-law)	<input type="checkbox"/> <b>Class 2 Permit</b> (Staff Variation)	<input type="checkbox"/> <b>Class 1 Permit</b> (Council Variation)

<b>1. LOCATION OF SUBJECT LANDS</b>	
Municipal Address:	
Town Lot and Concession Number:	
Registered Plan and Lot/Block Number:	
Reference Plan and Part Numbers:	
<b>2. APPLICANT INFORMATION:</b>	
Name:	
Address:	
City/Town:	Postal Code:
Telephone: (    )	E-mail:
<b>3. OWNER INFORMATION:</b> <input type="checkbox"/> Same as Applicant	
Name:	
Address:	
City/Town:	Postal Code:
Telephone: (    )	E-mail:
<b>4. PURPOSE OF APPLICATION:</b>	
Description of proposed work <i>(please include a detailed description including any proposed new structures or removal of structures, landscape changes, waterfront impacts, etc.):</i>	

**5. PROPERTY DIMENSIONS:**

Lot Frontage: \_\_\_\_\_ Lot Depth: \_\_\_\_\_ Lot Area: \_\_\_\_\_

Area of Work (m2): \_\_\_\_\_

**6. IS A VARIANCE BEING REQUESTED WITHIN THE PROVISIONS SET OUT IN THE COMMUNITY PLANNING PERMIT BY-LAW?**

Yes  No  
If Yes, please provide a brief description and rationale for the variance:

**7. ARE YOU PROPOSING TO CONSTRUCT ANY IN-WATER STRUCTURES? (i.e. Boathouse, Permanent Dock, Breakwaters)**

Yes  No  
If yes, please provide a brief description of the proposed in-water structures:

**8. ACCESS & SERVICING**

Property Access: By a Public Road By a Private Road Other:

Property Storm Drainage: Sewers Ditches Swales Other:

Water Service Type: Publicly owned Privately owned Other:

Sanitary Sewer Service Type: Septic System Privy Other:

Easement Yes No  
If yes, please provide a description:

**9. HAS THE LAND EVER BEEN THE SUBJECT OF AN APPLICATION UNDER THE ACT FOR:  Yes  No** If yes, please complete the below:

*Check all applicable boxes and provide file number if applicable:*  
Plan of Subdivision (File Number: \_\_\_\_\_ Status: \_\_\_\_\_)  
Zoning Amendment (File Number: \_\_\_\_\_ Status: \_\_\_\_\_)  
Site Plan Control (File Number: \_\_\_\_\_ Status: \_\_\_\_\_)  
Minor Variance (File Number: \_\_\_\_\_ Status: \_\_\_\_\_)  
Consent/Severance (File Number: \_\_\_\_\_ Status: \_\_\_\_\_)  
Other:

**10. HAVE YOU HAD ANY CONSULTATIONS WITH ANY DEPARTMENTS OR EXTERNAL AGENCIES?  Yes  No** If yes, please complete the below:

*Check all applicable boxes and provide file number if applicable:*  
Town of Innisfil staff  
Lake Simcoe Region Conservation Authority (LSRCA)  
Ministry of Natural Resources and Forestry  
Fisheries and Oceans Canada  
Transport Canada

**Check here to agree, if the Agent is not the owner:**

I have been authorized by the registered owner(s) of the subject lands to submit this application on their behalf. Furthermore, for the purpose of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), I authorize and consent to the use by disclosure to any person or public body of any information collected under the Planning Act for the purpose of processing this application.

**Check here to agree:**

I declare that all of the statements made and the information provided in this application, as well as any supporting documents are true. I make this declaration conscientiously believing it to be true and knowing it is of the same force and effect as if made under oath or solemn affirmation. I understand that it is an offence to declare a false statutory declaration under section 134 of the Criminal Code of Canada.

**Check here to agree:**

I declare that all documents, drawings, site plans, reports, information and material provided in this application will become the property of the Town of Innisfil and can be used for any reason deemed necessary by the Town of Innisfil.

**Check here to agree:**

If upon review of your application, Town Staff or Lake Simcoe Region Conservation Authority (LSRCA) requires additional review fees, the Applicant and/or Owner agrees to pay any additional review fees to the Town or LSRCA.

**Check here to agree:**

If, after six months after the issuance of this permit, the proposed work in respect to which it was issued, has not in the opinion of Town of Innisfil staff, been seriously commenced, the Town of Innisfil has the ability to revoke the permit. Also, in the opinion of Town of Innisfil staff, this permit can be revoked if the proposed work has been substantially suspended or discontinued for a period of more than one year.

I declare that I have read and understand the above.

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Print Name

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Signature

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Date

**Owner's Authorization for  
Applicant or Agent to Apply for a  
Permit on behalf of the Owner**



**Town of Innisfil  
Planning Department**  
2101 Innisfil Beach Road,  
INNISFIL, ON L9S 1A1  
Tel : 705-436-3710  
1-888-436-3710  
Fax: 705-436-7120

Date: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Proposed Work: \_\_\_\_\_

Location: \_\_\_\_\_

The undersigned, being the owner(s) of the above referenced property, authorizes

\_\_\_\_\_  
Applicant Name Address

to apply for a permit for the above referenced project on my behalf. I understand that I shall be responsible for the terms of the conditions contained in the permit.

(If owner is an INDIVIDUAL)

_____	_____
Owner's Name	Address
_____	_____
Owner's Signature	Phone No. / E-Mail

(If owner is a CORPORATION)

_____	_____
Owner's Name	Address
_____	_____
Name of Authorizing Officer	Phone No. / E-Mail
_____	
Signature of Authorizing Officer (I have authority to bind the Corporation)	