



## ORIGINAL SHORE ROAD ALLOWANCE CLOSURE APPLICATION FORM

**FOR OFFICE USE ONLY:**

**DATE STAMP - RECEIVED**

Application No. \_\_\_\_\_  
 Application Fee: \_\_\_\_\_  
 Received by: \_\_\_\_\_  
 Assigned to: \_\_\_\_\_  
 Assessment Roll No. \_\_\_\_\_  
 Official Plan Designation: \_\_\_\_\_  
 Zoning Classification: \_\_\_\_\_

*All application questions must be answered.  
 Incomplete applications shall be returned to the applicant (please type or print in ink).*

1. Registered Owner(s): \_\_\_\_\_ Tel. Nos.: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Agent: (if applicable) \_\_\_\_\_ Tel. Nos.: \_\_\_\_\_

4. Address: \_\_\_\_\_

5. Legal description of the subject lands:

Lot(s) \_\_\_\_\_ Concession \_\_\_\_\_

Township \_\_\_\_\_ Municipality \_\_\_\_\_

Parcel Number \_\_\_\_\_ Assessment Roll # \_\_\_\_\_

Reference Plan \_\_\_\_\_ Municipal/911 Address \_\_\_\_\_

6. Reason for applying to close original shore road allowance:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Witness

\_\_\_\_\_

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Registered Owner(s)

This information has been collected in accordance with Section 28 of the Municipal Act, 2001, S.O. 2001, c.25. This information is to be used solely for the purpose of administering this application. For further information, please contact the Sudbury East Planning Board at 39 Lafontaine Street, Unit 4 P.O. Box 250, Warren, Ontario, P0H 2N0 (Office: Tel. (705) 967-2174 & Fax (705) 967-2177).

Pursuant to Section 1.0.1 of the Planning Act, R.S.O. 1990, Chapter P.13 and in accordance with Section 32(e) of the Municipal Freedom of Information and Protection of Privacy Act, it is the policy of the Planning Board to make all planning applications and supporting material available to the public.

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## CONSENT OF ABUTTING PROPERTY OWNER

I / We, the undersigned, \_\_\_\_\_,

being the registered owner(s) of:

Lot(s)	_____	Concession	_____
Township	_____	Municipality	_____
Parcel Number	_____	Assessment Roll #	_____
Reference Plan	_____	Municipal/911 Address	_____

have no objection to the closing of the original shore road allowance, as shown on the attached sketch plan.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
\_\_\_\_\_  
Signature of Registered Owner(s)

\_\_\_\_\_  
Date

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I / We, the undersigned, \_\_\_\_\_,

being the registered owner(s) of:

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Township	_____	Municipality	_____
Parcel Number	_____	Assessment Roll #	_____
Reference Plan	_____	Municipal/911 Address	_____

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\_\_\_\_\_  
Witness

\_\_\_\_\_  
\_\_\_\_\_  
Signature of Registered Owner(s)

\_\_\_\_\_  
Date