



**THE CORPORATION OF THE TOWN OF LINCOLN  
APPLICATION FOR VALIDATION OF TITLE**

<b>FOR OFFICE USE ONLY</b>
CN: 3-5-02-07
Application: _____
Roll No.: _____

APPLICATION IS HEREBY MADE TO:

The Town of Lincoln  
4800 South Service Road  
Beamsville ON L0R 1B1  
Tel: (905)-563-8205 Fax: (905)-563-6566  
Email: generalinquiries@lincoln.ca

1. (a) Name of Applicant (s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
email: \_\_\_\_\_
- (b) Applicant's Solicitor (if any): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
email: \_\_\_\_\_
- (c) Authorized Agent (if any): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_
- (d) Please specify to whom all communications should be sent:  
Applicant [ ] Solicitor [ ] Agent [ ]

2. Description of Land:  
Municipality: \_\_\_\_\_  
Concession No: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Registered Plan No: \_\_\_\_\_ Lot(s) \_\_\_\_\_  
Reference Plan No: \_\_\_\_\_ Part(s): \_\_\_\_\_  
Geographic/Former Township: \_\_\_\_\_  
Name of Street: \_\_\_\_\_ Street No: \_\_\_\_\_
- (a) Frontage: \_\_\_\_\_ metres Depth: \_\_\_\_\_ metres Area: \_\_\_\_\_ sq.m/hectares  
(Circle one)
- (b) Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_
- (c) Number and use of existing and proposed buildings and structures on the land:  
Existing: \_\_\_\_\_  
Proposed: \_\_\_\_\_

3. In whose name is the property registered?

\_\_\_\_\_

4. When was the property purchased? \_\_\_\_\_

5. Did the previous owner retain any interest in the subject land?

Yes [ ] No [ ]

If "yes", please give details:

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

6. Do you have any interest in any abutting parcel of land?

Yes [ ] No [ ]

If "yes", please give details:

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

7. Why do you consider your title may require validation?

APPLICANTS MUST SUBMIT AN AFFIDAVIT OUTLINING THE HISTORY OF WHEN THE CONVEYANCE(S) BREACHING THE PLANNING ACT OCCURRED WITH A HISTORY OF THE FILE AND A CLAUSE CLEARLY SETTING OUT THE PURPOSE OF THE APPLICATION.

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

8. Type of access to subject land: (Check appropriate space)

- |   |  |
|---|--|
| <input type="checkbox"/> Provincial Highway                   | <input type="checkbox"/> Regional Road     |
| <input type="checkbox"/> Municipal Road maintained all year   | <input type="checkbox"/> Other Public Road |
| <input type="checkbox"/> Municipal Road maintained seasonally | <input type="checkbox"/> Right-of-Way      |
| <input type="checkbox"/> Water Access                         | <input type="checkbox"/> Private Road      |

9. What type of water supply is proposed? (Check appropriate space)

**TYPE**

- |  |                                |
|--|--------------------------------|
| Publicly owned and operated piped water supply | <input type="checkbox"/>       |
| Lake   | <input type="checkbox"/>       |
| Well (private or communal)                     | <input type="checkbox"/>       |
| Other (specify)                                | <input type="checkbox"/> _____ |

10. What type of sewage disposal? (Check appropriate space)

**TYPE**

- Municipally owned and operated sanitary sewage system [ ]
- Septic System (private or communal) [ ]
- Other (specify) [ ] \_\_\_\_\_

11. When will the above noted water supply and sewage disposal services be available?

\_\_\_\_\_

12. (a) Has the owner previously severed any land from this holding?

Yes [ ] No [ ]

(b) If the answer to (a) is "Yes", please indicate previous severances on the required sketch and supply the following information for each lot severed (attach schedule if required):

Grantee's (Purchaser's) name: \_\_\_\_\_

Relationship (if any) to owner: \_\_\_\_\_

Use of parcel: \_\_\_\_\_

Date parcel created: \_\_\_\_\_

Consent file number (if known): B \_\_\_\_\_

**NOTES:**

1. If this application is signed by an agent or solicitor on behalf of an applicant, the owner's written authorization must accompany the application. If the applicant is a corporation, acting without an agent or solicitor, the application must be signed by an officer of the corporation and the corporation's seal (if any) must be affixed.
2. An application must be accompanied by a preliminary drawing prepared, signed and dated by an Ontario Land Surveyor, showing the information set out below. In the case of multiple applications, one drawing plus one extra copy for each additional application will suffice.
  - (a) The boundaries and dimensions of any land abutting the subject land that is owned by the owner of the subject land;
  - (b) The distance between the subject land and the nearest township lot line or landmark such as a bridge or railway crossing;
  - (c) The boundaries and dimensions of the subject land in metric units;
  - (d) The location, size and type of all existing and proposed buildings and structures on the subject land, indicating the distance of the buildings or structures from the front yard lot line, rear yard lot line and the side yard lot lines.
  - (e) The approximate location of all natural and artificial features on the subject land and on the land that is adjacent to the subject land that, in the opinion of the applicant, may affect the application, such as buildings, railways, roads, watercourses, drainage ditches, river or stream banks, wetlands, wooded areas, wells and septic tanks;
  - (f) The existing uses on adjacent land, such as residential, agricultural and commercial uses;
  - (g) The location, width and name of any roads within or abutting the subject land, indicating whether it is an unopened road allowance, a public travelled road, a private road or a right of way;
  - (h) If access to the subject land is by water only, the location of the parking and boat docking facilities to be used;
  - (i) The location and nature of any easement affecting the subject land.
  - (j) Key map indicating location of property.
3. The following documentation is required to determine that a contravention has occurred:

- (a) Up-to-date abstract(s) of title for the subject land and abutting land(s) from deed prior to the contravention of the Planning Act;
- (b) Chart showing chain of title;
- (c) Copy of registered deeds to indicate various transfers that have occurred from the time the original contravention took place;
- (d) Copies of outstanding encumbrances, e.g. Mortgages, indicating legal descriptions and addresses; and
- (e) Any registered plans and reference plans for the subject lands.

4. One copy of this application form is to be filed for each subject parcel, together with the required copies of the preliminary drawing and the applicable application fee of \$1,300 in cash, money order or by cheque made payable to the Town of Lincoln.

\_\_\_\_\_  
 (Signature of Applicant(s), Solicitor or Authorized Agent)  
 (Affix Corporate Seal, if applicant is a corporation)

13. Complete the Authorization for Agent *if application to be signed by someone other than the owner(s)*:

**AUTHORIZATION FOR AGENT**

I/We \_\_\_\_\_, being the Applicant(s) of the property subject of this  
 (PRINT NAME)

Application for Validation of Title hereby authorize \_\_\_\_\_  
 (insert name of person authorized to sign/act on behalf of owner)

to make application(s) on my/our behalf to the Committee of Adjustment for the Town of Lincoln for validation of title pursuant to the provisions of Section 57 of the Planning Act, R.S.O., 1990, c.P. 13.

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Applicant

NOTE: This section only to be used for the applications to be signed by someone other than applicant(s). If applicant is a corporation, the corporate seal is to be affixed over the owner's signature(s).

**DECLARATION OF OWNER(S) THAT INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT**

DECLARED before me at the \_\_\_\_\_ ) TO BE SIGNED IN THE PRESENCE OF A  
 \_\_\_\_\_ of \_\_\_\_\_ ) COMMISSIONER FOR TAKING AFFIDAVITS  
 \_\_\_\_\_ )  
 in the Regional Municipality of Niagara )  
 \_\_\_\_\_ )  
 this \_\_\_\_\_ day of \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 20 \_\_\_\_\_ ) \_\_\_\_\_  
 (Signature of applicant(s), solicitor or authorized agent)

A Commissioner, etc.

Personal information collected on this application will become part of a public record. Any questions regarding this collection should be directed to: **The Freedom of Information and Privacy Coordinator: 4800 South Service Road, Beamsville ON L0R 1B1 (905) 563-8205.**