

SECOND DWELLING APPLICATION FORM

FOR OFFICE USE ONLY:

File No. _____

1. APPLICATION TYPE:

- Accessory Family Residential Use (SEC)**
- Accessory Seasonal Employee Residential Use (SEC)**
- Accessory Full-time Employee Residential Use (SEC)**
- Special Case Residential Use (SEC)**

2. PROPERTY(IES) *List all properties involved. If insufficient space, please attach a separate sheet.*

A. Provide the following information regarding the parcel on which the second dwelling is proposed:

- Civic address of parcel on which second dwelling is proposed: _____
- Farm type: _____
- Farm operation size: _____
- Current zoning: _____
- Legal Description for this parcel: _____

- PID for this parcel: _____

B. List all other properties to be included in the farm operation:

PID: _____ Farm Type: _____ Farm Operation Size: _____ ha
PID: _____ Farm Type: _____ Farm Operation Size: _____ ha
PID: _____ Farm Type: _____ Farm Operation Size: _____ ha

Attach a separate page with any additional information.

C. Additional information required:

- Total Gross Site Size (m²): _____
- Is/Are the property(ies) regulated under the *Agricultural Land Commission Act (ALC)*? YES NO
- Is the proposed Second Dwelling already constructed? YES NO
- How many dwellings exist on the farm operation? _____
- Is the Second Dwelling to be placed/constructed a "new for old" with the original house to be used as the second dwelling? YES NO
- Is the property in the floodplain? YES (which floodplain area? _____) NO
(If Yes, please note that if a Floodplain Covenant will need to be registered as a condition of approval of this application)

Note: Development Cost Charges will be required at time of Building Permit

3. APPLICANT For information regarding the collection and use of personal information provided with this application, see item 8 (page 5).

COMPANY NAME (If Applicable): _____

PRIMARY CONTACT NAME* (REQUIRED): _____

ADDITIONAL CONTACT NAME(S) (If Applicable): _____

MAILING ADDRESS: _____

OFFICE PHONE: _____ CELL: _____

DIRECT LINE: _____ EMAIL (REQUIRED): _____

**All correspondence will be addressed to the Primary Contact Name at the mailing address or e-mail address (maximum one e-mail address) provided.*

4. REGISTERED OWNER(S) List all registered owners of all associated properties as they appear on title (if insufficient space, please attach a separate sheet).

If registered property owner is an incorporated company or society, a **BC Company Summary must accompany this application.**

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL (REQUIRED): _____

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL (REQUIRED): _____

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL (REQUIRED): _____

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL (REQUIRED): _____

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL (REQUIRED): _____

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL (REQUIRED): _____

5. LAWYER/NOTARY CONTACT The City requires the necessary covenant template(s) to be sent to your Lawyer or Notary (of your choice); their office will prepare, acquire all signatures and register the covenant(s) at the Land Titles Office for the property noted in the application. Please note that if the property is in the floodplain area, a Floodplain Covenant will also be required as part of this application approval process.

FIRM NAME: _____

CONTACT NAME: _____ PHONE: _____

EMAIL (REQUIRED): _____



6. LETTER OF AUTHORIZATION *This section must be completed if the Registered Property Owner(s) (per Title Search) is/(are) not the Applicant OR if there are more than one Registered Property Owner and not all of the Registered Property Owners are signing as Applicants. Those Registered Property Owners who are not signing as Applicants must provide their written approval for (all of) the Applicant(s) acting on their behalf by signing this Letter of Authorization.*

I/We, (list all of the Registered Property Owner(s) on Title - attach additional completed sheets if necessary) _____ (the "Owner"),

own the lands described within this application form listed under Section 2 and confirm the appointment of:

(Applicant Company Name (if Applicable)) (All Contact Names Permitted to Work On This Application (Required))

with the following contact information: _____
(Applicant's Mailing address (Required))

() - _____ as agent (the "Applicant")
(Applicant's Phone Number (Required)) (Applicant's Email Address (Required))

with respect to this Development Application (the "Application") regarding the lands described in Section 2.

It is understood, that:

1. the City of Abbotsford shall deal exclusively with the above-noted applicant with respect to all matters pertaining to the Application and is under no obligation to communicate with the Owner or any other person;
2. the above-noted applicant has authority to make all necessary arrangements with the City of Abbotsford, to perform all matters and to take all necessary proceedings with respect the Application;
3. the above-noted applicant has authority to alter this original Development Application by submitting a subsequent related development application and providing an Administrative Change Request Form (No. APL-006) together with the required documents and fees; and
4. a written letter from the Owner is required to cancel this appointment and an Administrative Change Fee will be required.

By signing this authorization/application, I hereby agree that all information, including personal information, contained on this document including all attachments will be made available to the public.

If **Incorporated Company or Registered Society** is a Registered Owner, then complete the signature block below. If more than one Company/Society, attach additional completed pages with those signatures, as required. By signing, you are confirming that you're an authorized signatory of the company.

Signature of Witness
Print Name of Witness: _____
Phone: _____

**Name of Corporation/Society
By its Authorized Signatory(ies)**

Signature of Authorized Signatory
Print Name: _____
Date: _____

If Registered Owners are **individual persons**, then complete the signature block below. If more than two individual owners, attach additional *completed* versions of this page signed by those owners, as required.

ALL INDIVIDUAL PERSONS WHO ARE A REGISTERED PROPERTY OWNER AND ARE NOT AN APPLICANT MUST SIGN THIS AUTHORIZATION:

Signature of Witness
Print Name of Witness: _____
Phone: _____

Signature of Owner
Print Name: _____
Date: _____

Signature of Owner (if applicable)
Print Name: _____
Date: _____



**7. REQUIRED APPLICATION DOCUMENTATION:
(must be submitted in hard copy format)**

*Note: Electronic Copies must be in PDF format and cannot be secured. These must be received by the City at time of application, either prior to submission via email to: **planning-applications@abbotsford.ca**, or brought with the application package on a flash drive or disk.*

Use the check boxes to indicate the required documents included in your application.

Items Required for ALL applications:

- Completed Second Dwelling **Application Form** (only a hard copy required)
- Application **fee** (as per application sub-type)
- Letter of Intent** outlining the proposal in full (including *background/justification/rationale*).
- Proof of **Owner residing on the farm** operation (i.e. *Home Owners Grant*)
- Current **Land Title Search(es)** for all properties (*retrieved within the last 30 days*)
- Electronic copies of any **covenants, easements and rights-of-way** registered on title as a **charge** or listed as a **legal notation & modifications** to those (note: this **does not include** mortgages, priority agreements, leases, liens, statutory building schemes, undersurface rights, or assignments of rents).
- Site Sketch** outlining the proposal including dimensions of the property, site area and setbacks between buildings and property lines (*Ideally a sketch plan prepared by an architect or surveyor but hand-drawn sketch is acceptable. Minimum size: 8½" x 11"*)
- Letter of Authorization** (page 3 of this form) (*if applicable; only a hard copy required*).
- BC Company Summary** (*retrieved within the last 30 days*) (*if property owner is an incorporated company/society*)

In addition to the above-noted Required Submissions, ensure that the following items are included with the selected application type:



Accessory Family Residential Use

- Fee: **\$600**
- \$5,000 **Cash Security** or **Letter of Credit (LOC)** (*may be submitted at time of application or at a later date*)
- Proof of **Farm Status** from BC Assessment
- Name** of Family Member who will **reside** in Second Dwelling and who will work full-time on the farm:

(Name)

(Relationship to owner)

Accessory Seasonal Employee Residential Use

- Fee: **\$860**
- Proof of **Farm Status** from BC Assessment
- Photographs** of farm operation and existing dwellings
- Formal evidence of previous years' **sales earned** from farm operation**
- Copy of current **farm quota** (*if applicable*)
- All **lease information** and copy of registered lease agreement(s) (*if applicable*)
- SAWP** approval documentation (*if applicable*)
- Proposed **floor plans**, confirming size of the proposed building.
- Floor area** of seasonal dwelling unit: _____ m²
- Average # of **work hrs** per week: _____
- Name** of property owner or member of owner's family who **works full-time** on the farm:

(Name)

(Relationship to owner)
- Dates of **Occupancy:** (day and month)

From: _____

To: _____

Accessory Full-Time Employee Residential Use

- Fee: **\$600**
- Proof of **Farm Status** from BC Assessment
- Photographs** of farm operation and existing dwellings
- Formal evidence of previous years' **sales earned** from farm operation**
- Copy of current **farm quota** (*if applicable*)
- All **lease information** and copy of registered lease agreement(s) (*if applicable*)
- Average # of **work hrs** per week: _____
- Name** of property owner or member of owner's family who **works full-time** on the farm:

(Name)

(Relationship to owner)

Special Case Residential Use

- Fee: **\$600**
- \$5,000 **Cash Security** or **Letter of Credit (LOC)** (*may be submitted at time of application or at a later date*)
- Doctor's Note**
- Name** of person will **reside** in Second Dwelling:

(Name)

(Relationship to owner)

***If newly established farm operation provide formal proof (i.e. receipts) for farm set-up purchases.*

8. ACKNOWLEDGEMENT OF NOTICE OF COLLECTION OF PERSONAL INFORMATION

I/We have attached to this Second Dwelling application all of the attachments required as noted within this form, along with the required application fee, and hereby agree to submit further information deemed necessary for processing this application.

- I/We understand that for each occasion on which I/We initiate an Administrative Change to this application, an **Administrative Change Fee of \$300** is payable at the time the change is filed. This includes, but is not limited to: **changing the property(ies)** involved; changing the **Applicant or Primary Contact**; or changing/revising/adding an application type(s) and/or sub-type(s) (unless as a subsequent application).

Personal information collected on this form is collected for the purpose of processing this application and for administration and enforcement. The personal information is collected under the authority of the *Local Government Act*, the City's bylaws and Section 26 of the *Freedom of Information and Protection of Privacy Act*. It will not be used or disclosed other than for the purpose for which it was collected, except with the consent of the individual whom the information is about or otherwise in accordance with law.

If you have any questions about this collection and use of your personal information, contact the Information and Privacy Coordinator at 604-864-5575 or FOI@abbotsford.ca City of Abbotsford, 32315 South Fraser Way, Abbotsford, BC, V2T 1W7.

- If the Applicant is an Incorporated Company or Society, check this box to confirm that all contacts are authorized signatories of the company and they have authority to sign on the company's behalf.** If this box is not checked, a letter on Company Letterhead must be included to outline the permission they have

The information herein provided and attached is, to the best of my knowledge, complete and correct. I understand that acceptance of this application DOES NOT constitute permission to construct/place the above-described building. Further, I hereby agree that all information, including personal information, contained on this document may be made available to the public.

- Check here to confirm you understand that Development Cost Charges (DCCs) will be levied at time of Building Permit

Signature of Primary Contact (Applicant)

Date

Signature of Additional Contact(s) (if applicable)

Date

Applications will be accepted between the hours of **8:30 a.m. - 4:00 p.m.**

Please allow 15-30 minutes to process the application in-take.

If paying by cash or debit, additional time will be required.

Per Development Application Procedures Bylaw No. 2521-2016,
incomplete applications cannot be accepted.

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- ▶ If application is incomplete, indicate reason(s) and return to applicant:

- ▶ If application is complete, date stamp all documents and complete in-take.

Date Stamp:

Received by: _____

