



Heritage Permit Application Form

Economic Development Officer - Heritage Planning
Development Services
City of Kawartha Lakes
180 Kent Street West, Lindsay ON K9V 2Y6
Phone: (705) 324-9411 extension 1366
Email : heritage@kawarthalakes.ca

Please complete the following sections. For information on the application process, please refer to our heritage permitting guidelines.

Location of the designated property:

Municipal Address:	
Legal Description:	

Property owner:

Name:	
Address:	
Phone:	
Email:	

Applicant (if different from property owner):

Name:	
Address:	
Phone:	
Email:	

This property is designated under the Ontario Heritage Act as:

- ☐ An Individual Property (Part IV) ☐ Part of a Heritage Conservation District
☐ A Listed Property

Proposed Alterations:

- ☐ Building Alteration ☐ Building Addition ☐ Building Relocation
☐ Building Demolition ☐ New Construction ☐ Sign ☐ Other

Supporting Documents (check all that apply)

- ☐ Photographs ☐ Site Plan ☐ Elevations ☐ Architectural Drawings
☐ Supporting Studies ☐ Technical Specifications ☐ Other

Please describe in detail the nature of the proposed work:

Related Applications:

Does the proposal also require other approvals under the Planning Act or Municipal Act?
(i.e. minor variance, severance, demolition permit, building permit, site plan)

Yes ☐ No ☐

If yes, are you aware that a Heritage Permit must be approved first? *I acknowledge* ☐

Please list the application numbers for any other approvals for this proposal:

Owner’s Authorization

If the applicant is not the owner of the subject land, the owner’s written authorization to the applicant to make the application is required. Where the land is owned by multiple owners, all owners must sign the application or an authorization from each owner is required. If an agent is used, the owner(s) must complete the following:

I/We _____ being the registered owner(s) of the land subject to this application hereby authorize _____ to prepare, submit and act on my/our behalf with respect to this consent application.

Date: _____ Signature _____

Please print or type the name of the Owner (and if corporation, the officer’s position):

Date: _____ Signature _____

Please print or type the name of the Owner (and if corporation, the officer’s position):

Declaration & Signature:

An affidavit or sworn declaration by the applicant is required to declare that the information provided by the applicant is accurate. The applicant must complete the following:

I _____ hereby declare that the statements made herein are, to the best of my belief and knowledge, a true and complete representation of the purpose and intent of this application. I have reviewed the submission requirements and understand that incomplete applications may not be accepted. I acknowledge that any change to the approved drawings, however small, must be re-submitted for approval. Failure to do this may result in work stoppage and charges and/or fines under the Ontario Heritage Act.

I also understand that the proposal must comply with all other applicable legislation and municipal by-laws. For applications that require a building or sign permit, a copy of this application /approval will be forwarded to the Building Department.

I acknowledge that the City of Kawartha Lakes staff and members of the Municipal Heritage Committee (MHC) may visit the property that is the subject of this application for the purpose of evaluating the merits of the application. I acknowledge that personal information on this form is collected under the authority of the Ontario Heritage Act and will be used to process the Heritage Permit Application and the information may also be released to the public.

Applicant's Signature	Date
Commissioner of Oaths	Date

Please Complete And Submit The Application Package To: Economic Development –
Heritage Planning, City of Kawartha Lakes 180 Kent Street W., Lindsay, Ontario K9V 2Y6
Phone (705) 324-9411 extension 1366 Fax: (705) 324-8110
Email : heritage@kawarthalakes.ca

For Office Use Only		
Date Received:	Date Notice of Receipt Issued:	MHC Meeting Date:
Approval Expiry date:	Application Approval Date:	
☐ Application Approved ☐ Approved with Conditions ☐ Application Denied		
Staff Approval Signature:		