



600 Hutchinson Drive
 P.O. Box 820
 Port Elgin, ON N0H 2C0
 Telephone: 519-832-2008
 Fax: 519-832-2140
www.saugeenshores.ca

THE CORPORATION OF THE TOWN OF SAUGEEN SHORES
APPLICATION FOR ENCROACHMENT ON TOWN PROPERTY

This is an application to consider the possibility of allowing an encroachment onto Town owned property.

Applicant Name: Alexander Emree Siaroff
 Mailing Address: [REDACTED]
 Telephone: [REDACTED] E-Mail Address: [REDACTED]
 Cell Phone: [REDACTED]

ENCROACHMENT INFORMATION

Physical Address of Property to Encroach onto Town Property:

143 Knowles Lane, Southampton.

Legal Description of Property: Roll # 41-10-480-002-34600-0000

Lot # PT LT 23 E/S Conc # _____ Plan # R28468 Parts # 5 and 8

Description of encroachments: (sketch/survey must be attached or application will be considered incomplete)

Expansion and upgrade of existing deck. Removal and rebuild of existing deck and addition of 170 square feet of deck directly to south of existing. Addition of new stairs on the west side of existing deck.

Addition of walkway at deck elevation along south side of house to existing entryway.

Encroachment already exists: Yes No

Proposed Encroachment: Yes No

Reasons for requesting encroachment:

Existing deck is in need of replacement, creation of additional deck space, improved functionality, and beautification/
visual improvement of cottage facing boardwalk and beachfront.

Do you have a survey showing the encroachment: Yes No

If yes, please submit one copy of the survey. Survey plan will be required for Agreement.

The Applicant understands that this application is being taken in accordance with the Town's Encroachment Policy and may be denied based on the following criteria:

1. The encroachment interferes with the Town's intent and purpose in holding the Town-owned land;
2. The encroachment diminishes the public's right of usage of public lands;
3. New encroachments onto municipal property;
4. Unable to reasonably demonstrate a need for the encroachment;
5. The encroachment enlarges an existing encroachment;
6. The encroachment poses a danger to the public;
7. The encroachment creates an unsafe condition;
8. Construction has commenced prior to the issuance of a required permit from the Town;
9. Adversely affects municipal operations, work, plans, efforts or initiatives of the Town to maintain municipally-owned lands;
10. The encroachment interferes with any utility or other similar installation located on Town-owned lands;
11. The encroachment creates a situation that is contrary to any Town By-law, Town policy or resolution or any Provincial or Federal regulation or legislation;

In the event that this application is approved, it will be necessary for the Applicant to execute an Encroachment Agreement.

FEEES ASSOCIATED WITH APPLICATION

Administration Fee:	Established in the Fees & Charges By-law
Encroachment Agreement Deposit Fee:	\$500.00. Invoiced for actual costs incurred
Annual Fee:	Established in the Encroachment Agreement

SOLICITOR (if applicable)

Name: _____

Address: _____

Telephone: _____

E-Mail: _____

CONSENT

I/We understand and agree to provide the Town with an annual Certificate of Insurance, in perpetuity, as per Town policy.

I/We understand and agree to the terms of this Application.

I/We have enclosed the application fee: Yes No

I/We have enclosed a detailed sketch, site plan or survey, 'to scale', which clearly shows the location and measurements of all existing and/or proposed structures/encroachments on the applicant's property and all existing and/or proposed structures/encroachments on the abutting Town property (i.e. septic systems, well, landscaping, vegetation, fence/wall, driveways and paths) Yes No

I/We have enclosed a letter of authorization from the applicant/property owner appointing an agent: Yes No

I/We agree to pay the current applicable application and agreement fees and annual license fee.

I/We authorize Town staff to enter onto the subject lands to conduct a site visit in accordance with the processing of this Encroachment Licensing Agreement.

SIGNATURE(S)

[Redacted Signature]

OWNER

[Redacted Signature]

OWNER

AUTHORIZED AGENT (please attach letter of authorization)

January 6, 2025

DATE

**PLEASE RETURN THIS APPLICATION FORM TO:
TOWN OF SAUGEEN SHORES, CLERK'S OFFICE
600 TOMLINSON DRIVE, P.O. BOX 820
PORT ELGIN, ON N0H 2C0**

For further information please contact the Clerk's Office at 519-832-2008

Personal information on this form is collected in accordance with the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purposes of processing an Encroachment Licensing Agreement. Questions with respect to the collection and use of this information should be directed to the Clerk's Office at the address noted above.