



Islands Trust

www.islandstrust.bc.ca

Toll Free: 1 (800) 663-7867

Northern Office
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Gabriola Island, BC V0R 1X3
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DENMAN, GABRIOLA, GAMBIER,
HORNBY, LASQUETI, THETIS,
BALLENAS-WINCHESEA

Victoria Office
200 - 1627 Fort Street
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GALIANO, MAYNE, NORTH PENDER,
SATURNA, SOUTH PENDER

Salt Spring Office
1 - 500 Lower-Ganges Road
Salt Spring Island, BC V8K 2N8
Ph: (250) 537-9144
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ssiinfo@islandstrust.bc.ca

SALT SPRING

Preliminary Plan Review Process

Before you submit your documents:

- Review applicable Local Trust Committee bylaws, including:
 - **Land Use Bylaw**
 - Confirm that the subject property zoning permits the proposed use and density.
 - Confirm that uses, buildings and structures comply with siting, size and dimension requirements.
 - **Official Community Plan**
 - Determine whether or not proposed uses, buildings or structures are located within a Development Permit Area; if so, an application for a Development Permit may be required. Contact the Islands Trust to confirm.

For further information, visit the Islands Trust website at www.islandstrust.bc.ca and explore MapIT (<http://mapfiles.islandstrust.bc.ca>)

Review Process:

- An Islands Trust planner will review your completed submission.
- Supplementary information or clarifications may be requested.
- A planner will contact you if the submission does not comply with applicable Local Trust Committee bylaws to discuss options (e.g. termination of the review, amendment of the submission, or application for required Islands Trust permits).
- Once the review is completed the submission is forwarded with a response form to the applicant, copying the Regional District.
- Processing time can take up to (10) business days. Please wait at least 10 days before contacting us.
- Preliminary reviews are valid for up to six months.

Preliminary Plan Review Requirements

Please provide the following information submitted electronically to the Islands Trust - **incomplete applications will not be accepted:**

- Completed Preliminary Plan Review form (attached)
- Current title search (no more than 30 days old)
- Copies of all relevant title charges (restrictive covenants, easements, rights-of-way, etc.)
- A Site Plan* - with metric measurements, showing the following:
 - a. North arrow and date of drawing;
 - b. All lot lines with dimensions and area of the parcel taken from the registered subdivision plan;
 - c. The legal description and civic address of the parcel;
 - d. The location and dimensions of all statutory rights of way, easements, covenant areas, development permit areas and setback requirements;
 - e. The location, dimensions and setbacks of all existing and proposed buildings or structures (including retaining walls and septic fields) on the parcel;
 - f. Setbacks to the present natural boundary of the sea, and any lake, pond, wetland, or watercourse (determined by a BCLS);
 - g. The location, dimension and gradient of parking and driveway access.

***Information Note:** a Site Survey completed by a registered BC Land Surveyor (BCLS) may be required for siting of proposed, existing buildings and structures, determination of the natural boundary of the sea or watercourses, or development permit areas, covenant areas or easements.

- Floorplan drawings showing dimensions, total floor area calculations where required, and uses of all areas.
- Elevation drawings of all sides of the building or structure showing building height and grade as defined in the applicable bylaw
- Salt Spring Island Full Time Rental Cottages with a floor area greater than 56 square metres:* plans for a rainwater harvesting system certified by an ASSE-certified designer, professional engineer or geoscientist to comply with the bylaw.

NOTE: This information is intended to provide guidance only and should not be interpreted as a right to a development approval if the steps indicated are followed. Please consult the Local Government Act and its regulations, as well as the other Islands Trust applicable bylaws for the definitive requirements and procedures. For any further information, please contact the Islands Trust. Islands Trust staff cannot offer legal advice on the interpretation of statutes or bylaws, or answer for other agencies that may be affected by your inquiry. Persons requiring such advice should seek professional legal counsel and/or consult with other agencies where applicable.



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OFFICE USE ONLY:

Date Received	File No.	Regional District Building Permit No.
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Preliminary Plan Review Application Form

PROPOSED DEVELOPMENT (check all that apply):

1 <input type="checkbox"/> New Construction <input type="checkbox"/> Alter/Repair <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Change of Occupancy	2 <input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Two-Family Dwelling <input type="checkbox"/> Secondary Suite <input type="checkbox"/> Full-Time Rental Cottage (SSI) <input type="checkbox"/> Seasonal Cottage	<input type="checkbox"/> Accessory Building (carport, garage, outbuilding, studio, etc.) <input type="checkbox"/> Commercial <input type="checkbox"/> Farm Building <input type="checkbox"/> Retaining Wall <input type="checkbox"/> Other:
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PROPOSED USE(S): _____

SUBJECT PROPERTY DETAILS:

Parcel Identifier Number (PID): _____ Civic Address: _____

OWNER DETAILS:

Owner Name(s): _____

Mailing Address: _____

Contact Details: Phone: _____ Email: _____

AGENT AUTHORIZATION FOR APPLICANT (if different from owner):

As the registered owner(s) of the subject property, I/we hereby appoint the "applicant" to serve as the agent for this application, and communicate with Islands Trust staff and Islands Trust bodies on our behalf.

SIGNATURE

SIGNATURE

Owner Name: _____

Owner Name: _____

Applicant Name: _____

Mailing Address: _____

Contact Details: Phone: _____ Email: _____

DECLARATION:

BY SIGNING BELOW, I CERTIFY ALL INFORMATION PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

As the owner(s) or agent authorized to act on behalf of the owner(s) of the subject property, I declare the information submitted in support of this application is true and correct in all respects.

SIGNATURE

SIGNATURE

Print Name: _____

Print Name: _____

Freedom of Information

The collection of personal information, for the purpose of processing this application, is authorized under the Local Government Act, Community Charter and section 26(c) of the Freedom of Information and Protection and Privacy Act. Enquiries may be directed to a Deputy Secretary at any of the Islands Trust Offices, as noted on page 1 of this form. A request for information, under the Freedom of Information and Protection of Privacy Act may be made to: FOI Coordinator, Islands Trust, 200-1627 Fort Street, Victoria, BC V8R 1H8, Tel. (250) 405-5151, Fax (250) 405-5155.