

## Schedule "A"

## Township of Southgate

## Application for Fill Permitting or Site Alteration

Work Proposed	<input checked="" type="checkbox"/> Residential - new <input type="checkbox"/> Residential - addition <input checked="" type="checkbox"/> Filling/excavation <input checked="" type="checkbox"/> Landscaping <input type="checkbox"/> Other <input checked="" type="checkbox"/> Commercial/Industrial - New <input type="checkbox"/> Commercial/Industrial - Addition <input type="checkbox"/> Subdivision/Multi Residential <input type="checkbox"/> Demolition <input type="checkbox"/> Variance or Exception Request
Property Owner	Name <u>JESSE MARTIN</u> of _____ Company: <input checked="" type="checkbox"/> Mailing address: _____ E-mail address: _____ Contact Person: <u>VESSIE</u> Phone: _____
Applicant (if not owner)	Name of Company: _____ Mailing address: _____ E-mail address: _____ Contact Person: _____ Phone: _____
Project Location	Site name: <u>185673 GREY RD 9 Dundalk ONT</u> Construction address: <u>185673 GREY RD 9 Dundalk</u> Lot/block #: <u>18</u> Con: <u>13</u> Plan #: _____
Project Scheduling	Anticipated Construction Start Date: <u>MAY 1ST 2021</u> Construction Period (weeks): <u>3 months (approx)</u>
Site Contractor	Name <u>GFL</u> of _____ Contractor: _____ <u>4 Miles Horton Ave</u> Mailing address: <u>LARRY</u> Contact _____ person: _____
Material Source Location (if applicable)	Name _____ of _____ Contractor: _____ <u>TORONTO SUBWAY</u> Source _____ location _____ address: _____ Contact person: _____ Phone: _____

## Township of Southgate

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1. Does the subject property reside next to public owned lands?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have you checked for utility locations in the area of work?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3. How would you like to receive the permit?	<input type="checkbox"/> Mail	<input checked="" type="checkbox"/> Pick-up
4. Have you enquired whether the work proposed requires site plan approval?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
5. Are there trees located on/adjacent to municipal roadway or private lands?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
6. Will the proposed construction activity impact any abutting lands either public or private? If yes, please include details in writing with this application.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
7. Is this application to support a building/demolition permit? (Note: This permit is for related grading only. A building permit is required for the actual demolition).	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
8. Are the subject lands being developed for 'more sensitive' use as defined under the new sections of the environmental protection act? If 'yes' a record of the site condition (RSC) is required to support this application.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

**The application shall be accompanied by the following:**

1. A Site Plan certified by a professional engineer;
2. A Site Maintenance, Operations & Sediment Control Plan certified by a professional engineer;
3. A Soil Testing, Site/Soil Management and Reporting Protocol Plan certified by a professional engineer;
4. Documentation demonstrating consultation or approval with other authorities and agencies;
5. Haul route and roadway inspection plan for Southgate approval;
6. A letter and proof of liability insurance on the property provided from the property owner releasing and indemnifying the Township of Southgate
7. The application and deposit fees;
8. Certificate of general liability insurance naming the Township of Southgate; and
9. Bonding or irrevocable letter of credit (based on engineer estimates).

**Declaration and Application Approval**

I hereby agree to comply with the accept the Terms and Conditions of this By-law 2017-049 "Schedule C:" and grant the Township of Southgate permission to enter the subject lands to inspect the proposed work for which this permit applies to.

Owners Signature: [Signature] Date: April 8 2021

Office Use Only	
Refundable Deposit Amount: \$ <u>10,000.<sup>00</sup></u>	Receipt #: _____
Permit Fee: \$ <u>1,000.<sup>00</sup></u>	Receipt #: _____

Personal information on this form is collected and used for the purpose collected under the authority of Municipal Act, 2001 as amended. Questions about the collection of personal information should be directed to the Clerk's Department at 519-923-2110 extension 230.