



APPLICATION FOR A DEVELOPMENT, INTERFERENCE WITH WETLANDS AND ALTERATIONS TO SHORELINES AND WATERCOURSES PERMIT

(CONSERVATION AUTHORITIES ACT - ONT. REG. 41/24)

			gns the Landowner Authorization		
Owner's Name:			Phone (Business):		
Mailing Address:			Phone (Residential):		
City or Town:			Cell:		
Postal Code:		Email:			
If you are apply	ving on behalf o	f the owner:			
Applicant's Name		I	Phone:		
Address:		(Cell:		
City or Town:		Email:			
Postal Code:					
*Please complete all of the fields above if you are applying on behalf of the owner.					
Project Locatio	n:				
Municipal Address of	Project:				
Lot:	Concession:	Plan Lot:	Municipality:		





Application is hereby made for: (Check appropriate box(es):

Demolition New Building

Install a Septic System Deck

Fence LSRCA Funding Grant

Addition LOA

Alter a Watercourse/Crossing Work at Shoreline Fill Placement/Grade Alteration Construct a Pond

Swimming Pool Watercourse Crossing

Boathouse

Type and Origin of Fill (e.g. silt/clay/sand, on-site, off-site - if off-site, please provide documentation verifying the clean contents of the fill):

Description of proposed works:

This application must be accompanied by a digital submission of drawing via e-mail in PDF format of all required drawings (ie. Detailed site plan, grading plan, build elevations, etc.) and payment of processing fee as determined by the Conservation Authority.

To help us serve you better - please call for an appointment 905-895-1281 or 1-800-465-0437



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declare that the information included in this application is correct to the best of my knowledge and I agree to abide by Ontario Regulation 41/24.

I acknowledge that this application and supporting documents will be considered as public documents and available to the public upon written request under the Municipal Freedom of Information and Protection of Privacy (the Act).. I understand that any and all personal information gathered by the LSRCA will be used only for the express purpose(s) of the application for which it has been provided, and will not be divulged to any third party, private or public, without prior written consent, as provided for in the Act.

I grant permission to LSRCA staff to enter onto my property to conduct site inspections.

I acknowledge and agree that any permit issued pursuant to this application may be revoked if it is issued on the basis of false, inaccurate or misleading information.

Signature	Date	
How would you like to receive your permit:	Please select if you are:	
Call owner for pick-up	Owner	
Call applicant for pick-up	Agent/Application	
Please mail permit	Other	
Plassa a-mail narmit		

Please note: In accordance with LSRCA's File Dormancy Policy, a file shall be deemed dormant and closed if after a period of six (6) months, there has been no activity associated with the application. Once a file has been closed, an applicant wishing to proceed with their application will need to reapply for the proposed works – this will include the submission of a new application, documents to support the application and the appropriate processing fee.

Payment

Processing fees are non-refundable. Application fees are not subject to HST.

Paid by:

Cash Cheque Debit Visa

MasterCard

Credit card payments can be made over the phone by calling 905-895-1281.