

For Office Use Only
Date Received:
File #:

Restricted Land Use Declaration Form

Contact and Property Information	
Name and Company (if applicable):	
Mailing Address:	
Phone Number:	
E-mail Address:	
Subject Property Address:	
Assessment Roll Number:	
Legal property description:	
Date this form was submitted:	
Date this form was submitted.	
Brief Description of Proposal Please check one: Ne	w Development Expansion
Signature I declare that:	
• I have read and understood the Restricted Land Use Info area);	ormation Sheet applicable to (insert vulnerable
 the activities identified as significant drinking water thre described in the related Restricted Land Use Information event that the related proposal is approved; 	
• all of the information provided on this form is correct to	the best of my knowledge; and
 in the event that the details of the proposal change such associated with the proposal, I will notify the risk manage 	
Signature of Proponent	Date

Questions?

Regional Risk Management Office Contacts

613-546-4228 or 1-877-956-2722

Risk Management Official/Inspector Lead: Holly Evans (ext. 233) hevans@crca.ca

Risk Management Official/Inspector Support: Andrew Schmidt (ext. 244) aschmidt@crca.ca