

Restricted Land Use Submission Form

Contact and Property Information

Name and Company (if applicable):	John Smith
Mailing Address:	123 Number Road, Town, ON, L8J 6X6
Phone Number:	613-123-4567
E-mail Address:	johnsmith@email.com
Subject Property Address:	Same as above
Assessment Roll Number:	080600025700000000
Legal property description:	Part lot 8, Concession IX, Township of X
Date this form was submitted:	April 1, 2015
Name of municipal staff person that directed you to the restricted land use process:	Jane Symthe

You can get this information from: Your tax bill and your deed

Description of Proposal

Please check one: New Development Expansion

A new garden centre for seasonal operation during the spring/summer/fall/ During the winter, snow will be stored in the northern section of the parking lot.

Reason(s) Proposal was flagged for Risk Management Official Consideration

Please refer to the “applicable activities” on the Restricted Land Use Information Sheet and fill in the following table.

Applicable Area(s)	Applicable Activity	Applicable Land Use(s)
Drinking Water Supply 'X' IPZ-1	Handling and storage of more than 2,500 kilograms of pesticides containing MCPA or Mecoprop	Garden Centre
Drinking Water Supply 'X' IPZ-1	Snow Storage	Large Parking Lot

List of Attachments

Please attach any information that may help the risk management official’s review, including a drawing of the property and the location/extent of any activities of concern. Please list any attachments to this form:

1. Recent Lot line survey
2. Agreement with J.M. Snow Removal Service
3. _____
4. _____
5. _____

Site Drawing

If you have printed the form and would like to include a hand drawing to outline the property and location/extent of any activities of concern, please use the following page.

Signature

I declare that I have read and understood the Restricted Land Use Information Sheet applicable to the (*insert vulnerable area*) _____ and that all of the information provided on this Restricted Land Use Submission Form is correct to the best of my knowledge.

Signature of Proponent

Date

Questions?

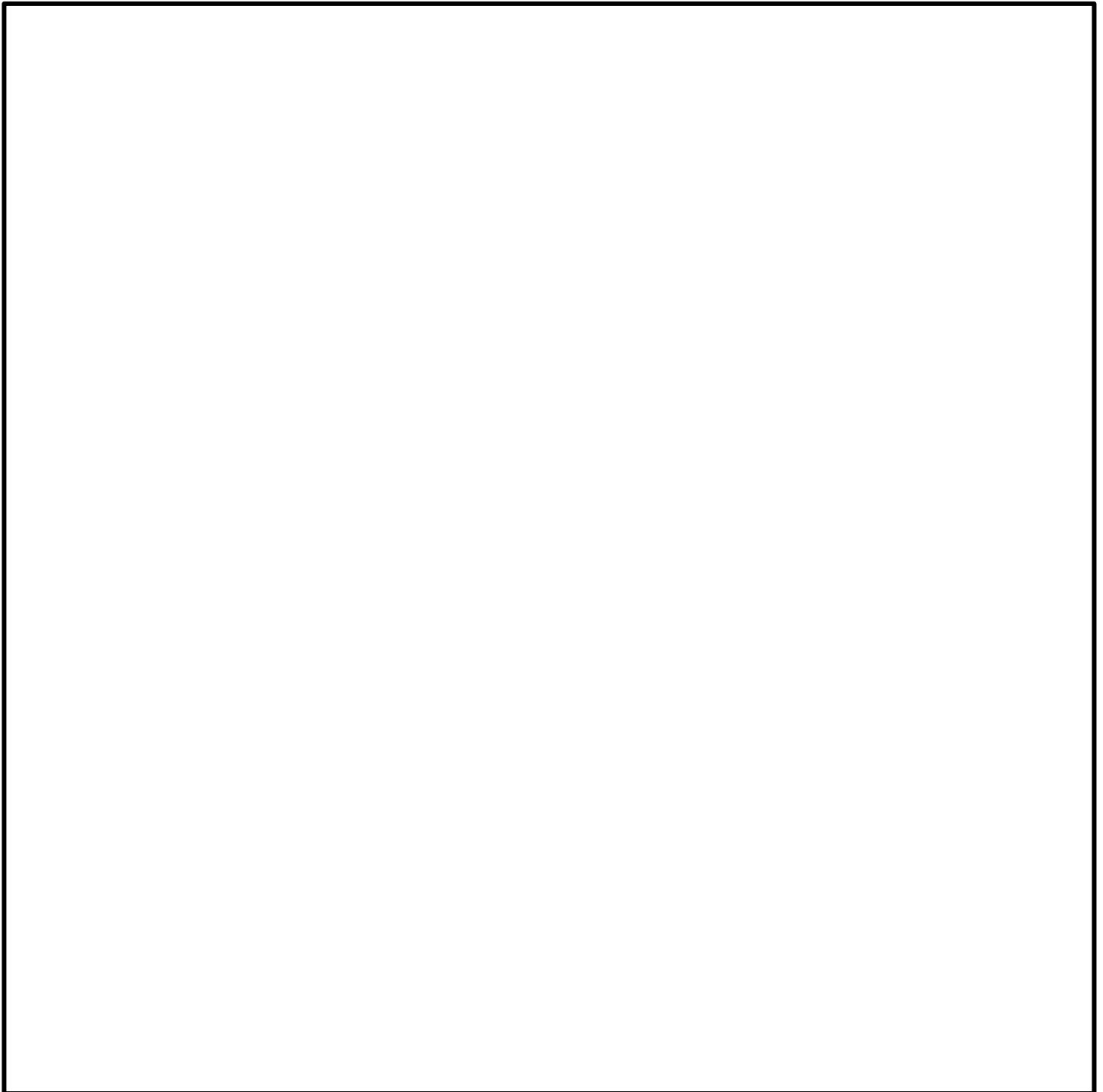
Regional Risk Management Office Contacts

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

Please include a north arrow, street numbers and other points of reference.



Note: All information collected on this submission form is subject to the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and subsection 54 (3) of the Clean Water Act. Information will also be provided to the Ministry of the Environment and Climate Change.

Note: Incomplete submission forms will delay the review process. Please ensure submission forms are complete before submission.