

Application for Approval of Hauled Sewage (septage), Sewage Biosolids and Other Wastes

Ce formulaire est disponible en français

For Office Use Only			
Reference Number	Payment Received \$	Date (y/m/d)	Initials

General Information and Instructions



General:

Information requested in this form is collected under the authority of the *Environmental Protection Act*, R.S.O. 1990 (EPA) and will be used to evaluate applications for approval of waste management systems under Section 27, EPA.

Instructions:

- When completing this form, please refer to the "Guide for Applying for Approval of Hauled Sewage (septage) or Processed Organic Waste (biosolids) Disposal Site (referred to as the Guide) and "Guide - Application Cost for Waste Management, S. 27, EPA." Questions regarding completion and submission of the application should be directed to your local District Office of the Ministry of the Environment.
- This form must be completed with respect to all requirements identified in the Guide in order for it to be considered as an application for approval. **INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT.**
- A complete application consists of:
 - a completed and signed application form, including the attached "Costs for EPA S. 27 Applications - Supplement to Application for Approval";
 - all required supporting information identified in this form and the Guide, and
 - a certified cheque or money order, in Canadian funds, made payable to the *Minister of Finance* for the applicable application fee.
 The Ministry may require additional information during the technical review of any application accepted as complete.
- The application, along with the supporting information and application fee, must be submitted to the local Ministry District.
- Information contained in this application is not considered confidential and will be made available to the public upon request. Information submitted as supporting information may be claimed as confidential but will be subject to the *Freedom of Information and Protection of Privacy Act* (FOIPPA). If you do not claim confidentiality at the time of submitting the information, the Ministry may make the information available to the public without further notice to you.
- If the Client submits with the application a copy of their Master Business Licence (MBL) obtained from the Ministry of Government Services the **shaded sections within this form do not need to be completed**. For additional information on the MBL please refer to the "Guide."

1. Client Information (Owner of works/facility)

Client Name (legal name of individual or organization as evidenced by legal documents)		Business Identification Number
Business Name (the name under which the entity is operating or trading if different from the Client Name - also referred to as trade name)		
Client Type:	Activity Classification Code/Standard Industrial Classification Code (if unknown please complete Business Activity Description)	
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Federal Government <input type="checkbox"/> Municipal Government <input type="checkbox"/> Provincial Government <input type="checkbox"/> Other (describe):	
Business Activity Description (a narrative description of the business endeavour, this may include products sold, services provided or machinery/equipment used, etc.)		

2. Client Physical Address - Complete A, C and D or B, C and D

A. Civic Address- Street information (applies to an address that has civic numbering and street information includes street number, name, type and direction)		Unit Identifier (identifies type of unit, such as suite & number)	
B. Survey Address (used for a rural location specified for a subdivided township, an unsubdivided township or unsurveyed territory)			
Lot and Conc.: used to indicate location within a subdivided township and consists of a lot number and a concession number.	Lot	Conc.	Part and Reference: used to indicate location within an unsubdivided township or unsurveyed territory, and consists of a part and a reference plan number indicating the location within that plan. Attach copy of the plan.
			Part
			Reference Plan
C. Municipality/Unorganized Township	County/District	Province/State	Country
			Postal Code
D. Telephone Number (including area code & extension)	Fax Number (including area code)	E-mail Address	

3. Client Mailing Address - Complete A and C or B and C

A. Civic Address - Street information (includes street number, name, type and direction)				<input type="checkbox"/> Same as Client Physical Address	Unit Identifier (identifies type of unit, such as suite & number)
B. Delivery Designator: <input type="checkbox"/> Rural Route <input type="checkbox"/> Suburban Service <input type="checkbox"/> Mobile Route <input type="checkbox"/> General Delivery					Delivery Identifier (a number identifying a Rural Route, Suburban Service or Mobile Route delivery mode)
C. Municipality	Postal Station	Province/State	Country	Postal Code	

4. Site Information - (location where activity/works applied for is to take place)

Site Name	MOE District Office	Legal Description (attach copy of a legal survey)			
A. Site Address - Street information (applies to an address that has civic numbering and street information - includes street number, name, type and direction)				<input type="checkbox"/> Same as Client Physical Address	Unit Identifier (identifies type of unit, such as suite & number)
B. Survey Address (used for a rural location specified for a subdivided township, an unsubdivided township or unsurveyed territory) NOTE: Do not complete "B" if you completed "A."					
Lot and Conc.: used to indicate location within a subdivided township and consists of a lot number and a concession number.	Lot	Conc.	Part and Reference: used to indicate location within an unsubdivided township or unsurveyed territory, and consists of a part and a reference plan number indicating the location within that plan. Attach copy of the plan.	Part	Reference Plan
Non Address Information (includes any additional information to clarify clients' physical location)					
Geo Reference					
Map Datum	Zone	Accuracy Estimate	Geo Referencing Method	UTM Easting	UTM Northing
Municipality/Unorganized Township		County/District		Postal Code	
Adjacent Land Use				Is the Client the owner or lessee of the site?	
<input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Other (specify):				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the Site located on the Oak Ridges Moraine Conservation Area as defined by the Oak Ridges Moraine Conservation Plan (ORMCP), a regulation made under the Oak Ridges Moraine Conservation Act (ORMCA)?					
<input type="checkbox"/> Yes (If yes please attach proof of Municipal planning approval for the proposed activity/work) <input type="checkbox"/> No					

5. Landowner Information (if not the client) - Complete A, B, and D or A, C, and D

A. Landowner Name				B. Phone No.	
C. Civic Address - Street information (includes street number, name, type and direction)				Unit Identifier (identifies type of unit, such as suite & number)	
D. Delivery Designator: <input type="checkbox"/> Rural Route <input type="checkbox"/> Suburban Service <input type="checkbox"/> Mobile Route <input type="checkbox"/> General Delivery				Delivery Identifier (a number identifying a Rural Route, Suburban Service or Mobile Route delivery mode)	
E. Municipality	Postal Station	Province/State	Country	Postal Code	

6. Lessee Information (if applicable) - Complete A, B, and D or A, C, and D

Same as Client Mailing Address

A. Lessee Name		B. Phone No.		
C. Civic Address - Street information (includes street number, name, type and direction)				Unit Identifier (identifies type of unit, such as suite & number)
D. Delivery Designator:		Delivery Identifier (a number identifying a Rural Route, Suburban Service or Mobile Route delivery mode)		
<input type="checkbox"/> Rural Route	<input type="checkbox"/> Suburban Service	<input type="checkbox"/> Mobile Route	<input type="checkbox"/> General Delivery	
E. Municipality	Postal Station	Province/State	Country	Postal Code

7. Project Information

Type of Application:		Current Certificate of Approval No.	Expiry Date of Most recent Certificate of Approval (y/m/d)	Date of Issue (y/m/d)
<input type="checkbox"/> New Certificate of Approval <input type="checkbox"/> Amendment to current Certificate of Approval				
Project Description Summary (If EBR is applicable, this summary will be used in the EBR posting notice)				
Project Name (Project identifier to be used as a reference in correspondence)				
Project Type				
<input type="checkbox"/> Hauled Sewage(septage)		<input type="checkbox"/> Sewage biosolids		<input type="checkbox"/> Other wastes Specify:
Type of Crops Before appl.:		After appl.:		
Source of Hauled Sewage/Sewage Biosolids/Other Wastes		Type of Hauled Sewage/Processed Organic Waste/Other Waste		
<input type="checkbox"/> Municipal <input type="checkbox"/> Provincial <input type="checkbox"/> Private <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional <input type="checkbox"/> Industrial <input type="checkbox"/> Other (specify):		
Amount of Hauled Sewage/Sewage Biosolids at the site, based on a single application proposed to be:		<input type="checkbox"/> Spread _____ (cubic meters) <input type="checkbox"/> Stored _____ (cubic meters) <input type="checkbox"/> Disposed _____ (cubic meters)		
Mode of Application		Date of Last Application of Waste	Type of Waste applied (paper mill residue (sludge), hauled sewage (septage), grease trap waste, sewage biosolids)	
<input type="checkbox"/> Injection <input type="checkbox"/> Surface Spreading <input type="checkbox"/> Other (specify):				
Total Site Area (hectares (ha)/acres):		Total Usable Area (hectares (ha)/acres):		
Type of Soil:		Soil Permeability:		
Average slope:		<input type="checkbox"/> 0 - 3% (flat) <input type="checkbox"/> 3 - 6% (gentle slope) <input type="checkbox"/> 6 - 9% (moderate slope) <input type="checkbox"/> > 9% (steep slope)		
Depth to water table: (at time of spreading)		Distance to nearest well (metres):		
<input type="checkbox"/> < one metre <input type="checkbox"/> > one metre				
Average depth to bedrock:		Well Type:	Depth of well:	
<input type="checkbox"/> 0 - 1.5 metres <input type="checkbox"/> over 1.5 metres				
Distance to nearest water course (metres):		Distance to other sensitive land use (metres):		
Distance to closest house on-site (metres):		Please specify:		
Distance to closest house off-site (metres):				
Distance to nearest residential development (five or more houses in a cluster) (metres):				
Proposed Winter Spreading/Storage				
<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, <input type="radio"/> Storage <input type="radio"/> Injection <input type="radio"/> Spreading				
Is the Site tile drained? <input type="checkbox"/> Yes <input type="checkbox"/> No		Lot and Conc.: used to indicate location within a subdivided township and consists of a lot number and a concession number		Lot Conc.
		Part and Reference: used to indicate location within an unsubdivided township or unsurveyed territory, and consists of a part and a reference plan number the location within that plan. Attach copy of the plan indicating		Part Reference Plan

8. Sewage Biosolids & Other Waste Sources

Estimated Volume Handled on an annual basis:		tonnes:	cubic metres:	
		gallons/litres:		
Plant/Facility Name	Plant/Facility Owner		Plant/Facility Type	
Civic Address- Street information <i>(applies to an address that has civic numbering and street information includes street number, name, type and direction)</i>			Unit Identifier <i>(identifies type of unit, such as suite & number)</i>	
Survey Address <i>(used for a rural location specified for a subdivided township, an unsubdivided township or unsurveyed territory)</i>				
Lot and Conc.: used to indicate location within a subdivided township and consists of a lot number and a concession number.	Lot	Conc.	Part and Reference: used to indicate location within an unsubdivided township or unsurveyed territory, and consists of a part and a reference plan number indicating the location within that plan. Attach copy of the plan.	Part Reference Plan
Municipality/Unorganized Township	County/District	Province/State	Country	Postal Code
Telephone Number <i>(including area code & extension)</i>	Fax Number <i>(including area code)</i>	E-mail Address		

9. Other Approvals

List the Certificate of Approval number(s) for the Waste Management System associated with this application *(if available at the time of the application)*

10. Supporting Information Checklist - This is a list of all supporting information to this application and is subject to the FOI/POPA.

Supporting information	Attached	Reference	Can be disclosed
Proof of Legal Name of Client	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Sketch of the site showing relevant features, structures, setback areas, sensitive uses and spreading areas	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Topographical map showing site location	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Attached Information	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

11. Payment Information

Amount Enclosed: **\$** _____ *Please attach completed "Costs for EPA s.27 Applications – Supplement to Application for Approval" (PIBS 4186).*

12. Statement of Client

I, the undersigned hereby declare that, to the best of my knowledge, the information contained herein and the information submitted in support of this application is complete and accurate in every way and that the Project Technical Information Contact identified in section 5 of this form is authorized to act on my behalf for the purpose of obtaining approval under Section 27 of the EPA for the waste disposal site identified herein.

Client Name	Signature	Date (y/m/d)

13. Statement of Landowner (if not the client) This section is mandatory, signature is required		
I, the landowner of the property identified herein, hereby consent to the use of the property as described in this application for approval.		
Client Name	Signature	Date (y/m/d)

14. Statement of Lessee (if applicable)		
I, the lessee of the property identified herein, hereby consent to the use of the property as described in this application for approval.		
Client Name	Signature	Date (y/m/d)

15. Payment Information	
Method of Payment <input type="checkbox"/> Certified Cheque <input type="checkbox"/> Money Order	Amount enclosed \$