

Regular Council
**Community
Development Services
Report**



To: Mayor & Members of Council
Department: Community Development Services
Meeting Date: July 14, 2021
Subject: I&D 2021-26 Endorsement of MoECP ECA Application, Stormwater Management Facilities, Colgan 1 & 2, Tribute Development

RECOMMENDATION

THAT Infrastructure & Development Report #2021-26 dated July 14th, 2021 entitled “Endorsement of MoECP ECA Application, Stormwater Management Facilities, Colgan 1 & 2, Tribute Development” be received; and further,

THAT staff be authorized to sign the Colgan 1 & 2, Tribute Development MoECP (Ministry of Environment, Conservation & Parks) ECA (Environmental Compliance Approval) application forms, on behalf of the Township of Adjala-Tosorontio, to allow for commencement of the Ministry’s review and approval.

PURPOSE/BACKGROUND

The Colgan 1 & 2, Tribute Development proposal has approved Conditions of Draft Plan Approval which include the requirement to design and construct, at their expense, the necessary Water, Wastewater & Stormwater facilities, to the satisfaction of the Township, to accommodate their development. All municipal Sewage & Water facilities to be constructed in Ontario require advance approval of the MoECP in the form of an approved ECA (under the OWRA (Ontario Water Resources Act) and SDWA (Safe Drinking Water Act) prior to any construction commencement.

The Ministry requires that prior to reviewing any application for municipal water and/or sewage services submitted by a private entity, the host municipality must endorse the application. This endorsement requirement ensures that the Municipality has had the opportunity to review the proposed plans and application in advance of an ECA being issued for the proposed facilities.

ANALYSIS AND DISCUSSION

The Colgan 1 & 2 proposed developments, by Tribute have approved Draft Plan Conditions that require “Full Servicing” (i.e. Municipal communal Water, Wastewater & Storm facilities) to be provided as some of the elements necessary to fulfill their Draft Plan Conditions. These services must be designed by Professional Engineers in accordance with Guidelines for these systems established by the MoECP. The Draft Plan Conditions provide that the services must meet the requirements of the Township.

Site specific servicing design has been progressing for a number of years by Engineers working for the Developer and their designs have undergone review and requisite revisions as dictated by Engineers working on behalf of the Township.

The design details for the Stormwater Management Facilities have now reached the point of approval by our Township's peer review Engineers and the plans are in a state of readiness for review and approval by the MoECP in order to obtain a requisite ECA which will govern the construction and operation of these facilities.

With respect to Attachments: The ECA application package which has been assembled to meet the requirements of the MoECP are attached. These include the specific page from the ECA application package which requires Municipal endorsement prior to the MoECP commencing their review.

Appendices

- excerpts from the ECA Application packages for the proposed Stormwater Management Facilities to service the Colgan 1 & 2, Tribute Development(s):
- E-mail from Greenland to Adjala-Tosorontio Recommending ECA Application endorsement

LEGAL IMPLICATIONS

Ontario statutes require a developer to hold approved Draft Plan Conditions and be in possession of appropriate ECAs, as well as being party to an executed Development Agreement prior to construction of municipal communal Water, Wastewater and Stormwater facilities. The Ministry requires endorsement by the host municipality to process an ECA applications for these works. This is a necessary step in the Development process.

FINANCIAL IMPLICATIONS

There are no direct costs to the Municipality related to endorsing these applications. All peer review costs leading to plan finalization are the responsibility of the Developer.

POLICY IMPLICATIONS

N/A

COMMUNITY BASED STRATEGIC PLAN IMPLEMENTATION

Economic Development - to promote economic opportunities that meet the needs of the community and are financially and environmentally sustainable., Effective Governance - to provide governance that is responsive to the needs of its residents in a manner that is open, transparent and fiscally responsible., Environmental Stewardship - to promote responsible use and protection of the natural environment through conservation and sustainable practices, in areas that fall under the jurisdiction of the Township.

CONSULTATIONS

Rhonda Bunn, CAO

Simcoe County Oversight Representatives - including Dan Amadio

Greenland International - Township Peer Review Consultants

Developer Representatives including their Engineers

NEXT STEPS

Once the Developer's detailed plans for the remaining requisite Water, Wastewater & Stormwater facilities achieve recommendation of sufficiency by the Township's Peer Review Engineers, additional ECA applications will require municipal endorsement to receive requisite provincial approval for construction and operation.

Development Agreement(s) between the Township and Developer must be negotiated and executed prior to construction commencement.

All draft Plan Conditions must be satisfied prior to registration.

CONCLUSION

That a motion in the form of the "Recommendation" above be considered by Council to allow for the advancement of the ECA review for this Development.

ATTACHMENTS:

[210630 Colgan 1 SWM ECA Application Forms for Township endorsement](#)

[210630 Colgan 2 SWM ECA Application forms for Township endorsement](#)

[210630 Colgan 1&2, Stormwater Management Facilities, ECA Application - Greenland Endorsement e-mail](#)

Prepared By: John Thompson, Director of Infrastructure

Approved By:
Rhonda Bunn, CAO

Approved - 04 Jul 2021

Table of Contents

General Information and Instructions	1	5 Facility Information	17
1 Applicant Information	2	5.1 Air	17
1.1 Applicant Information	2	5.2 Noise	18
1.2 Applicant Physical Address	2	5.3 Sewage Works	19
1.3 Applicant Mailing Address	2	5.4 Waste Disposal Site	21
2 Project Information	4	5.5 Waste Management Systems	
2.1 Project Name and Description	4	5.6 Waste Management System –	
2.2 Application Type	5	5.7 Cleanup of Contaminated Sites	29
2.3 Project Type	6	6 Supporting Documentation	
2.4 Approval Information	6	6.1 General	30
2.5 Other Approval/Permits for Facility	7	6.2 Air	31
2.6 Technical Contacts	7	6.3 Noise and Vibration	31
3 Regulatory Requirements	9	6.4 Sewage Works	31
3.1 Environmental Bill of Rights (EBR)		6.5 Waste Disposal Sites	32
3.2 <i>Environmental Assessment Act</i> (EAA)		6.6 Waste Management Systems	33
3.3 Consultation/Notification	10	6.7 Mobile Waste Processing	34
4 Site Information	13	6.8 Cleanup of Contaminated Sites	34
4.1 Site Address or Storage Location	13	6.9 Other Attachments	34
4.2 Site or Storage Location Information	13	6.10 Confidentiality	34
4.3 Site Zoning and Classification	14	7 Authorization	35
4.4 Point of Entry into Ontario	14	7.1 Statement of the Applicant	35
4.5 Source Protection/Drinking Water Threats	15	7.2 Statement of the Municipality	35
4.6 Receiver of Effluent Discharge	15	7.3 Statement of Technical Contacts	35
		8 Payment Information	36
		Application Summary	38

General Information and Instructions

General Information

Information requested in this form is collected under the authority of the *Environmental Protection Act* (EPA), *Ontario Water Resources Act* (OWRA) and Environmental Bill of Rights (EBR), and will be used to evaluate applications for Environmental Compliance Approvals (ECAs) issued under Part II.1 of the EPA. This application form should not be used for mobile PCB destruction facilities.

For all questions related to preparing or submitting this form or about the Ministry's collection of information related to applying for an ECA, contact:

Client Services and Permissions Branch
135 St. Clair Ave. West, 1st Floor
Toronto Ontario M4V 1P5
Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions

1. Applicants are responsible for ensuring that they complete the most recent application form. Application forms and information about the required supporting documentation and technical requirements are available from the Client Services and Permissions Branch (the address and phone number are provided in the General Information on this page). As well, you can get this information from your local District Office of the Ministry of the Environment and Climate Change, and online at: <https://www.ontario.ca/page/environmental-approvals>
2. A complete application consists of:
 - a completed and signed application form;
 - all required supporting documents and technical requirements identified in:
 - i. this form,
 - ii. Ministry guidance,
 - iii. the Applications for Environmental Compliance Approvals regulation, and
 - payment of the application fee (in Canadian funds) by certified cheque or money order made payable to the Minister of Finance, or credit card payment (for payments up to \$10,000). For Transfer of Review, make the cheque or money order payable to the appropriate municipality. **The Ministry may return or refuse incomplete applications to the applicant.** The Director may require additional information of any application initially accepted as complete.
3. Submit the complete application as follows:
 - One (1) paper copy (unless the application is a Transfer of Review), one (1) electronic copy and the fee to the Director, Client Services and Permissions Branch at the address provided in the General Information on this page.
 - If the application is a Transfer of Review, the applicant must submit two (2) copies of the completed application and the fee to the designated municipal authority.
4. The applicant must also send a copy of the application without the fee to the local Ministry District Office that has jurisdiction over the area where the facilities are located. DO NOT send payment to the District Office.
 - To locate the appropriate local Ministry District Office, visit the Ministry of the Environment and Climate Change website at: <http://www.ontario.ca/environment-and-energy/ministry-environment-and-climate-change-regional-and-district-offices>
5. For Waste Disposal Sites the applicant must also send a copy of the application without the fee to the Clerk's office of the local municipality (both upper and lower tier) in which the facility/proposed facility is located unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality. DO NOT send any payment information to the municipality.

Information collected by the Ministry of the Environment and Climate Change is subject to the *Freedom of Information and Protection of Privacy Act (FIPPA)*. If the applicant is of the view that any part of the application is confidential on the grounds that such information constitutes a trade secret or scientific, technical, commercial, financial or labour relations information, please make this known now. Otherwise, the Ministry may make the information available to the public without further notice to the applicant.

It is an offence under the EPA and OWRA to provide false or misleading information in this application and/or accompanying documents.

Complete the sections as shown below.

- Section 1: Applicant Information
- Section 2: Project Information
- Section 3: Regulatory Requirements
- Section 4: Site Information
- Section 5: Facility Information
- Section 6: Supporting Documentation
- Section 7: Payment Information
- Section 8: Authorization

Fields marked with an asterisk (*) are mandatory.

1. Applicant Information

1.1 Applicant Information

Applicant Type *

- Corporation Individual Federal Government Municipal Government
 Partnership Provincial Government Sole Proprietor
 Other (specify) _____

Applicant Name (Legal name of individual or organization as evidenced by legal documents) *

Tribute Colgan 1 Limited

Select if Business Name same as Applicant Name

Business Name *

Tribute Colgan 1 Limited

Business Number *

809213325

Business Website Address

Primary North American Industry Classification System (NAICS) Code *

237210

Other NAICS Code

Separate list attached?

Yes No

Business Activity Description

✓ Completion Status (1.1 Applicant Information)

1.2 Applicant Physical Address

Address Type? *

Civic Address Survey Address

Civic Address

Unit Number 1	Street Number * 1815	Street Name * Ironstone Manor
------------------	-------------------------	----------------------------------

Survey Address

Enter Lot and Concession or Part and Reference Plan

Lot	Concession	Part	Reference Plan
-----	------------	------	----------------

Municipality/Unorganized Township * Pickering		County/District		
Province/State * Ontario		Country * Canada		Postal/Zip Code * L1W 3W9
Telephone Number * 905-839-3500	ext.409	Fax Number	Mobile Number	Email Address * frank.z@mytribute.ca

Geo Reference

Description of location	Map Datum	Zone	Accuracy Estimate	Geo-Referencing Method	UTM Easting	UTM Northing
Southwest corner of property	NAD83	17	25	GoogleMaps	651,420.64	4,852,830.94
Physical location of front door or main entrance	NAD83	17	25	GoogleMaps	651,452.47	4,852,913.79

✓ Completion Status (1.2 Applicant Physical Address)

1.3 Applicant Mailing Address

Select if same as Physical Address

Unit Number 1	Street Number * 1815	Street Name * Ironstone Manor
------------------	-------------------------	----------------------------------

Delivery Designator	Delivery Identifier	Postal Station
---------------------	---------------------	----------------

Municipality/Unorganized Township * Pickering		County/District		
Province/State * Ontario		Country * Canada		Postal/Zip Code * L1W 3W9
Telephone Number * 905-839-3500	ext.409	Fax Number	Mobile Number	Email Address * frank.z@mytribute.ca

✓ Completion Status (1.3 Applicant Mailing Address)

2. Project Information

2.1 Project Name and Description

Project Name *

Tribute Colgan 1 - SWM

Project Description Executive Summary *

The proposed development consists of 315 residential units. A portion of the site will be allocated to institutional uses as well as area for roads, parks, open space, and a stormwater management pond. In total, the area of the lot is 80.71 ha (199.44 ac).

Quality and quantity control of internal storm runoff will be provided such that the post development flows do not exceed pre development conditions for all storms up to and including 100 year events, and MECP Enhanced Protection quality control is provided. Stormwater quantity and quality criteria will be met via a storm water management pond in the north area of the site. Groundwater will also be collected in the storm sewer system. The groundwater flows will bypass the pond and be treated with an Oil & Grit Separator prior to discharging to the site outlet.

This application is for the stormwater management facilities in the Tribute Colgan 1 Development.

Supplemental Application Information (select information button for required information for this field) *

Enclosed for your review and approval is an application for the proposed stormwater management pond and Oil & grit separator at the above noted development. This application package includes the following:

- 1) A completed and signed (Applicant and Municipality) application form;
- 2) One bound sets of drawings;
- 3) Articles of Incorporation for the Applicant;
- 4) Servicing and Stormwater Management Implementation Report; and,
- 5) An application fee in the amount of \$2200.

A complete package has also been submitted to the district office in Barrie.

Should you have any questions or concerns regarding the information provided, please do not hesitate to contact our office.

✓ Completion Status (2.1 Project Name and Description)

2.2 Application Type

Type *

- | | |
|---|---|
| <input checked="" type="checkbox"/> New ECA | <input type="checkbox"/> Amendment to existing ECA |
| <input type="checkbox"/> Revocation of existing ECA | <input type="checkbox"/> Administrative amendment to existing ECA |
| <input type="checkbox"/> Application for renewal of limited operational flexibility | <input type="checkbox"/> Consolidation of existing ECAs |

Is this application for the addition of a new project type to the site or a new municipal waste category/class code to the waste management systems or a new sewage facility type?

Yes No

Is this application for Transfer of Review? *

Yes No

✓ Completion Status (2.2 Application Type)

2.3 Project Type

Project Type (Select all that apply) *	Limited Operational Flexibility?	Pilot Project?
<input type="checkbox"/> Air - Stationary	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Air - Mobile	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Noise	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Vibration	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Landfill site	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Transfer site	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Processing site	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Composting site	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Thermal Treatment site	N/A	<input type="checkbox"/>
<input type="checkbox"/> Sewage - Industrial	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Sewage - Municipal	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Sewage - Private	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System – General Waste Management System	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System - Hauled Sewage (Septage)	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System – Soil Conditioner for transport to a site for Application on Land	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System - Mobile Waste Processing	N/A	<input type="checkbox"/>
<input type="checkbox"/> Cleanup of contaminated sites - Mobile	N/A	<input type="checkbox"/>
<input type="checkbox"/> Cleanup of contaminated sites - Site specific	N/A	<input type="checkbox"/>

 Completion Status (2.3 Project Type)

2.4 Approval Information

Application initiated by *

- Applicant
 S. 20.18 Order (attach copy)
- Condition of existing approval
 Provincial Officer Order (attach copy)
- Inspection Report (attach copy)
 Other (specify) _____

Current Environmental Compliance Approvals that may be changed or amended by this application: N/A

Environmental Compliance Approval Number	Date of Issuance (yyyy/mm/dd)

Separate list attached?

- Yes No

Proposed Environmental Compliance Approvals related to this project: N/A

Project Type	Ministry Reference Number (if applicable)	Have Submitted	Have not Submitted
		<input type="checkbox"/>	<input type="checkbox"/>

Separate list attached?

- Yes No

 Completion Status (2.4 Approval Information)

2.5 Other Approval/Permits for Facility N/A

List all other instruments (approvals or permits) issued by the Ministry of the Environment and Climate Change or applied for under the *Environmental Protection Act*, *Environmental Assessment Act*, *Ontario Water Resources Act* and *Safe Drinking Water Act, 2002* and any Environmental Activity and Sector Registrations that are relevant to this application.

Instrument Type	Instrument Number/ Application Reference Number	Approval or Application Date (yyyy/mm/dd)

Separate list attached?

Yes No

List all other instruments (approvals or permits) issued by an agency, municipality or another ministry that are relevant to this application.

Issuing Agency	Approval or Permit Name	Approval or Permit Number	Issued Date (yyyy/mm/dd)

Separate list attached?

Yes No

Completion Status (2.5 Other Approval/Permits for Facility)

2.6 Technical Contacts

Technical Contact 1

Area of Responsibility (Select all that apply) *

Air Noise/Vibration Sewage Waste

Name of Technical Contact

Last Name *

Masotti

First Name *

Geoff

Company *

C.F. Crozier & Associates

Address Information

Select if same as Applicant Mailing Address

Civic Address

Unit Number

Street Number *

57

Street Name *

John Street West

Delivery Designator

Delivery Identifier

Postal Station

Municipality/Unorganized Township *

Bradford

County/District

Province/State *

Ontario

Country *

Canada

Postal/Zip Code *

L3Z2B4

Telephone Number *

905-952-3111

ext.

Fax Number

Mobile Number

Email Address *

gmasotti@cfcrozier.ca

Completion Status (2.6 Technical Contacts)

3. Regulatory Requirements

3.1 Environmental Bill of Rights (EBR) Requirements

Is this a proposal for a prescribed instrument under the EBR? *

Yes No

If yes, is this proposal exempted from the EBR requirements? *

Yes No

If yes, please check one of the following (Please provide supporting information.) *

This proposal has been considered in a substantially equivalent process of public participation. (EBR, 1993, s.30.)

Was the public participation process carried out in fulfillment of the requirements related to an approval under the *Planning Act*? *

Yes No

If yes, was the *Planning Act* approval related to a plan of subdivision? *

Yes No

This proposal is for an emergency situation. (EBR, 1993, s. 29.)

This proposal is for an amendment to or revocation of an existing Environmental Compliance Approval that is not environmentally significant. (EBR, 1993, s. 22 (3).)

This proposal has been subject to or exempted from EAA Requirements or considered in a decision of a tribunal. (EBR, 1993, s. 32.)

 Completion Status (3.1 Environmental Bill of Rights (EBR) Requirements)

3.2 Environmental Assessment Act (EAA) Requirements

Is the proposed undertaking subject to the requirements of the EAA? *

Yes No

If yes, please select one of the following:

The proposed undertaking has fulfilled the requirements of the EAA through the completion of a Class EA process

Name of Class EA _____

Schedule/Group/Category (if applicable) _____

If applicable, please submit a copy of the proof of completion (for example, Notice of Completion).

Was the undertaking subject of a Part II Order request(s)?

Yes No

If yes, please submit a copy of the Director's or Minister's decision letter.

The proposed undertaking has fulfilled all of the requirements for the EAA through:

Select all that apply:

completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the EAA

completion of an Environmental Screening Process pursuant to O. Reg. 116/01 of the EAA

Was the undertaking subject of an elevation request(s)?

Yes No

If yes, please submit a copy of the Director's decision letter. If an appeal was made to the Director's decision, please also submit a copy of the Minister's decision letter.

completion of an Environmental Screening Process pursuant to O. Reg. 231/08 of the EAA

Was the undertaking subject of an objection(s)?

Yes No

If yes, please submit a copy of the Minister's decision letter.

The proposed undertaking has fulfilled the requirements of the EAA through the completion of an individual Environmental Assessment.

Please submit a copy of the signed Notice of Approval.

Was the undertaking exempted from the requirements of the EAA? *

Yes No

The proposed undertaking has fulfilled the requirements of the EAA through an exemption provided under:

Select one of the following *

Section * 2 of Ontario Regulation No. * 345/93 or

Declaration/Exemption Order Number _____

If Regulation, Declaration Order or Exemption Order does not refer directly to this undertaking, please provide supporting documentation to explain why it applies to this facility

 Completion Status (3.2 *Environmental Assessment Act* (EAA) Requirements)

3.3 Consultation/Notification

Indigenous Consultation:

Is the proposed project/activity on Crown land or does/would it alter access to Crown land? * Yes No

Is the proposed project/activity in an open or forested area where hunting, trapping or plant gathering could occur? * Yes No

Does the proposed project/activity involve the clearing of forested land? * Yes No

Could the proposed project/activity impact a water body (e.g., direct discharge) or alter access to a water body? * Yes No

Could the proposed project/activity impact cultural heritage or archaeological resources, or access to them? * Yes No

Is the proposed project/activity adjacent or close to a First Nation Reserve? * Yes No

Is the applicant aware of any concerns from Indigenous communities about this proposed project/activity? * Yes No

Were there conditions placed, or direction provided, in another (or previous) permit or approval for consultation in relation to this project/activity? * Yes No

Based on the online Guide to Applying for an Environmental Compliance Approval, or direction provided by the ministry or another agency, are Indigenous consultation activities likely required as part of this application process? * Yes No

If Yes to the question above, please describe the consultation/notification activities undertaken for this application or as part of another process (e.g., EAA) in relation to the proposed project/activity, including a summary of the notification/consultation, First Nation and Métis communities contacted, key issues raised and how they were addressed, any changes to the project as a result of these activities, and any planned consultation/notification activities in the future.

Please attach supporting documents (e.g., record of consultation, delegation letter and/or direction provided by the Crown, materials provided to communities, meeting notes and agendas, correspondence with communities as appropriate).

If the applicant has determined that consultation with First Nation and Métis communities is not likely required for the proposed project/activity, please provide a rationale why: *

Neither First Nation nor Metis communities are present in the vicinity of the project site.

Other Consultation/Notification:

Has the applicant had a ministry pre-application consultation in relation to the proposed project? *

Yes No

If this application is for a waste disposal site, have the neighbour notification requirements been completed?

Yes No

If yes, please attach a Public Consultation/Notification Report that includes the notice and list of recipients.

If no, please select the reason for not undertaking neighbour notification:

Application is for an administrative amendment

The proposal was subject to public consultation through an Environmental Assessment process

other , please explain _____

Are there any other consultation/notification activities that have been undertaken to fulfill requirements by other legislation or through voluntary efforts? *

Yes No

If yes, please:

1. describe the consultation/notification activities below; and
 2. attach documents describing each of these consultation\nnotification activities, any changes to the project as a result of these activities and any planned consultation/notification activities in the future.
-



Completion Status (3.3 Consultation/Notification)

4. Site Information

4.1 Site Address or Storage Location

Will the vehicles or equipment be stored at more than one location?

Yes No

(If yes, please enter all vehicle or equipment storage locations below and attach separate list, as necessary.)

Select if same as Applicant Physical Address

Address Type? *

Civic Address Survey Address

Primary Civic Address

Unit Number	Street Number	Street Name

Additional Civic Addresses

Unit Number	Street Number	Street Name

Separate list attached?

Yes No

Primary Survey Address

Enter Lot and Concession or Part and Reference Plan *

Lot *	Concession *	Part	Reference Plan
9 & 10	7		

Additional Survey Address

Enter Lot and Concession or Part and Reference Plan

Lot	Concession	Part	Reference Plan

Separate list attached?

Yes No

Municipality/Unorganized Township *	County/District *
Adjala-Tosorontio	Simcoe

Province/State *	Country *	Postal/Zip Code *
Ontario	Canada	LOG1W0

Non-address Information (includes any additional information to clarify the physical location)

Geo Reference (required)

Select if same as Applicant Physical Geo Reference

Description of location	Map Datum *	Zone *	Accuracy Estimate *	Geo-Referencing Method *	UTM Easting *	UTM Northing *
Southwest corner of property	NAD83	17	25	GoogleMaps	591,636.21	4,874,454.99
Physical location of front door or main entrance	NAD83	17	25	GoogleMaps	591,843.28	4,875,729.63

✓ Completion Status (4.1 Site Address or Storage Location)

4.2 Site or Storage Location Information

Site Name *

Tribute Colgan 1

Days and Hours of Operation *

N/A

Ministry of the Environment and Climate Change District Office *

Barrie District Office

Is the site (property) that is the subject of this application owned by the applicant? *

Yes No

If no, please include the owner's name, address and a signed document indicating that the applicant has the authority to install and operate the proposed activity, or store vehicles or equipment on the land.

Is the applicant the operating authority of the site that is the subject of this application? *

Yes No

If no, please include the operating authority name, address and phone number.

Is the site located in an area of development control as defined by the *Niagara Escarpment Planning and Development Act* (NEPDA)? *

Yes No

If yes, please attach a copy of the NEPDA permit for proposed activity.

Is the site within an area covered by the Oak Ridges Moraine Conservation Plan? *

Yes No

If yes, please attach proof of municipal planning approval for the proposed activity/work (for example, zoning by-law, letter from municipality, etc.).

Completion Status (4.2 Site or Storage Location Information)

4.3 Site Zoning and Classification N/A

Current Land Use *

Agricultural

Official Plan Designation *

Residential

Current Zoning (Please attach zoning map, if available.) *

Hamlet Residential

Adjacent Land Use (select all that apply) *

Industrial Agricultural Commercial Recreational Residential

Other (specify) _____

Adjacent Land Zoning *

Rural, Hamlet Residential, Agricultural

Does the current zoning permit the proposed activity? *

Yes No

Does the applicant have correspondence from the municipality to confirm that the current zoning of the property permits the proposed use? *

Yes No If yes, please attach correspondence from the municipality.

Does the official plan designation support the proposed activity? *

Yes No N/A

Completion Status (4.3 Site Zoning and Classification)

4.4 Point of Entry into Ontario N/A

(for waste management system vehicles that are stored at an address outside of Ontario)

City in closest proximity to the point of entry

Description of Point of Entry

✓ Completion Status (4.4 Point of Entry into Ontario)

4.5 Source Protection/Drinking Water Threats (sewage or waste disposal site applications only) N/A

Check the source protection area(s) where the activity is/will be located *

- | | | |
|---|--|--|
| <input type="checkbox"/> Ausable Bayfield | <input type="checkbox"/> Cataraqui Region | <input type="checkbox"/> Catfish Creek |
| <input type="checkbox"/> Central Lake Ontario | <input type="checkbox"/> Credit Valley | <input type="checkbox"/> Crowe Valley |
| <input type="checkbox"/> Essex | <input type="checkbox"/> Ganaraska | <input type="checkbox"/> Grand River |
| <input type="checkbox"/> Grey Sauble | <input type="checkbox"/> Halton | <input type="checkbox"/> Hamilton |
| <input type="checkbox"/> Kawartha-Haliburton | <input type="checkbox"/> Kettle Creek | <input type="checkbox"/> Long Point |
| <input type="checkbox"/> Lakehead | <input type="checkbox"/> Lake Simcoe and Couchiching/Black River | <input type="checkbox"/> Lower Trent |
| <input type="checkbox"/> Lower Thames Valley | <input type="checkbox"/> Maitland Valley | <input type="checkbox"/> Mattagami |
| <input type="checkbox"/> Mississippi Valley | <input type="checkbox"/> Niagara | <input type="checkbox"/> North Bay Mattawa |
| <input type="checkbox"/> Northern Bruce Peninsula | <input checked="" type="checkbox"/> Nottawasaga Valley | <input type="checkbox"/> Rideau Valley |
| <input type="checkbox"/> Raisin Region | <input type="checkbox"/> South Nation | <input type="checkbox"/> Saugeen Valley |
| <input type="checkbox"/> Sault Ste. Marie | <input type="checkbox"/> Severn Sound | <input type="checkbox"/> Sudbury |
| <input type="checkbox"/> St. Clair Region | <input type="checkbox"/> Toronto and Region | <input type="checkbox"/> Otonabee-Peterborough |
| <input type="checkbox"/> Outside a source protection area | <input type="checkbox"/> Quinte | <input type="checkbox"/> Upper Thames River |

Is the proposed activity located or planned to be located in a vulnerable area identified in a local assessment report source protection plan under the *Clean Water Act, 2006*? *

Yes No

If yes, what is/are the vulnerable area(s)/zone(s)? *

- Wellhead Protection Areas Surface Water Intake Protection Zones Highly Vulnerable Aquifers
 Significant Groundwater Recharge Areas

Is the activity being applied for identified as a significant drinking water threat in the assessment report for the local source protection area? *

Yes No

✓ Completion Status (4.5 Source Protection/Drinking Water Threats)

4.6 Receiver of Effluent Discharge (sewage applications only) N/A

Intermediate Receiver Name *

Bailey Creek

Watershed Name *

Nottawasaga Valley

Type of Receiver *

- Surface Water Groundwater Other (specify) _____

Has the facility received local Conservation Authority clearance? (for stormwater management facility discharging to the natural environment) *

Yes No

If yes, please include a copy of the Conservation Authority clearance.

Final Receivers N/A

Will the proposed activity discharge sewage to any of the following critical receivers? *

Lake Simcoe

Rideau River

Detroit River

Great Lakes

Rouge River

Bay of Quinte

Other (specify) _____

Is the receiver a Policy 2 receiver? *

Yes No

Does the applicant have a Policy 2 deviation approval from the directors?

Yes No

If yes, please attach a copy of the Director's approval.

Completion Status (4.6 Receiver of Effluent Discharge)

5. Facility Information

5.1 Air Note** - If the application does not have air emissions please proceed to Section 5.2

[Information](#)

5.1.1 Summary of Equipment that Discharges Contaminants to the Air

Select Type of Equipment	Number of Pieces of Equipment
<input type="checkbox"/> Combustion equipment that uses natural gas, propane, no. 2 oil, landfill gas or sewage treatment gas for fuel for the purpose of providing comfort heating or emergency power, producing hot water or steam, or heating material in a system that does not discharge to the atmosphere (Total Heat input of all units: $\leq 50,000,000$ kJ/hr)	N/A
<input type="checkbox"/> Storage tanks	N/A
<input type="checkbox"/> Welding operations that use a maximum of 10 kilograms of welding rod per hour	N/A
<input type="checkbox"/> Combustion equipment that uses waste-derived fuel for the purpose of providing comfort heating, burning ≤ 15 litres per hour	
<input type="checkbox"/> Heat cleaning ovens used for parts cleaning and associated parts washers or degreasing equipment, other than solvent degreasing equipment	
<input type="checkbox"/> Cooling towers	
<input type="checkbox"/> Equipment used to control emissions of contaminants, other than a fume incinerator	
<input type="checkbox"/> Laboratory fume hoods	
<input type="checkbox"/> Paint spray booths and associated equipment that have a design capacity of up to 8 litres per hour of paint	
<input type="checkbox"/> Grain dryers	
<input type="checkbox"/> Any other equipment not listed above with a flow rate of less than or equal to $1.5 \text{ m}^3/\text{second}$	
<input type="checkbox"/> Any other equipment not listed above with a flow rate of greater than $1.5 \text{ m}^3/\text{second}$	
<input type="checkbox"/> Equipment that is subject to an Environmental Compliance Approval, and from which there is no proposed increase in the discharge of any contaminant that was previously reviewed by the Director.	N/A

Completion Status (5.1.1 Summary of Equipment that Discharges Contaminants to the Air)

5.1.2 Emission Summary and Dispersion Modelling (ESDM) Report

Is the review of an existing, approved ESDM required as part of this proposed application?

Yes No

If yes, identify the number of emission sources described in the existing ESDM Report that emit contaminants in common with the sources forming the subject of the application (if none, enter zero).

Have all of these emission sources been described in an ESDM Report that was previously reviewed as part of an application for an existing Environmental Compliance Approval?

Yes No

Completion Status (5.1.2 ESDM Report)

5.1.3 O. Reg. 419/05 Requirements

Which of the following sections of O. Reg. 419/05 applies to the facility?

s.19 (Schedule 2)

s. 20 (Schedule 3)

Does not apply. Please indicate reason _____

Has an instrument under O. Reg. 419/05 been issued?

Yes No

If yes, what type(s) of instruments (including any notices, orders or approvals) has (have) been issued? (select all that apply)

ss. 4(2) Adjacent Properties

ss. 7(1) Specified Dispersion Models

ss. 8(2) Negligible Sources

ss. 10(2) Operating Conditions

ss. 11(2) Refined Emission Rates

ss. 13.1 Value of Dispersion Modeling Parameters

ss. 13(1) Meteorological Data

ss. 14(6) Area of Modelling Coverage

ss. 20(4) Speed-up Request

ss. 20(5) Speed-up Order

s. 35 Site-specific Standard

ss. 35(14) Site-specific Standard Order

ss. 39(3) Technical Standard Registration (Industry Standard)

ss. 39(4) Technical Standard Registration (Equipment Standard)

Other (list all that have been issued) _____

Is an instrument under O. Reg. 419/05 being requested as part of this application?

Yes No

If yes, what type(s) of notice, order or approval is (are) being requested?

ss. 7(1) Specified Dispersion Models

ss. 8(2) Negligible Sources

ss. 10(2) Operating Conditions

ss. 11(2) Refined Emission Rates

ss. 13(1) Meteorological Data

ss. 14(6) Area of Modelling Coverage

ss. 20(4) Speed-up Request

s. 32 Request for a Site-specific Standard Order

ss. 39(1)(a) Application for Technical Standard Registration (Industry Standard)

ss. 39(1)(b) Application for Technical Standard Registration (Equipment Standard)

Other (list all that have been issued) _____

Please attach the form(s) requesting the notice(s) and/or order(s) and any additional supporting information.

Has an s. 30 Upper Risk Threshold (Schedule 6) been exceeded?

Yes No

If yes, please include additional supporting information.

Is the facility located in a multi-tenant building?

Yes No

If yes, additional information may be requested.

Are all of the contaminants to which the application relates represented in the Ministry of the Environment and Climate Change publication titled "Summary of Standards and Guidelines to support Ontario Regulation 419: Air Pollution- Local Air Quality" or have they been screened out based on the publication titled " Jurisdictional Screening Level (JSL) List, A Screening Tool for Ontario Regulation 419: Air Pollution - Local Air Quality"?

Yes No

(If no, please attach Supporting Information for a Maximum Ground Level Concentration Acceptability Request for Compounds with no Ministry POI Limit - Supplement to Application for Approval, EPA S. 9).

✓ Completion Status (5.1.3 O. Reg. 419/05 Requirements)

✓ Completion Status (5.1 Air)

5.2 Noise Note** - If the application does not have noise emissions please proceed to Section 5.3

5.2.1 Noise Assessment [Information](#)

Has an Acoustic Assessment Report (AAR) been completed in relation to the proposed project/activity?

Yes No

If yes, please attach the Acoustic Assessment Report

Does the AAR show that applicable limits are met?

Yes No

If no, please attach the Acoustic Assessment Report including the Noise Abatement Action Plan

If no, is the application eligible for Primary or Secondary Noise Screening?

Yes No

Note that if the proposed activity is not eligible for either of the screenings, an AAR must be submitted.

If yes, is the proposed activity eligible for the Primary Noise Screening?

Yes No

If yes, is the actual separation distance between the facility and the nearest noise sensitive point of reception (POR) greater than the minimum required separation distance calculated from the Primary Noise Screening?

Yes No

If yes, please attach the Primary Noise Screening form and supporting documentation.

Note that if the Primary Noise Screening is not successful then the applicant may attempt to proceed with the Secondary Noise Screening.

If no, does the Secondary Noise Screening Form show that the applicable sound level limits are met?

Yes No

If yes, please attach the Secondary Noise Screening Form and supporting documentation.

Note that if meeting the applicable sound level limits cannot be demonstrated, then an AAR must be submitted.

✓ Completion Status (5.2.1 Noise Assessment)

5.2.2 Equipment Subject to Noise Review

Description	Number of Pieces of Equipment
<input type="checkbox"/> Arc Furnaces	
<input type="checkbox"/> Asphalt Plants	
<input type="checkbox"/> Blow-down Devices	
<input type="checkbox"/> Co-Generation Facilities	
<input type="checkbox"/> Crushing Operations	
<input type="checkbox"/> Flares	
<input type="checkbox"/> Gas Turbines	
<input type="checkbox"/> Pressure Blowers or Large Induced Draft Fans (flow rate > 47 m ³ /second or static pressure > 1.25 kilopascals)	
<input type="checkbox"/> Any other equipment not listed above that has not previously been reviewed by the Director in connection with an application for an Environmental Compliance Approval with respect to the facility	
<input type="checkbox"/> Any other equipment not listed above that is identical to equipment for which a noise assessment was previously reviewed by the Director in connection with an application for an Environmental Compliance Approval with respect to the facility	

✓ Completion Status (5.2.2 Equipment Subject to Noise Review)

✓ Completion Status (5.2 Noise)

5.3 Sewage Works [Information](#)

Note** - If the application does not contain Sewage Works please proceed to Section 5.4

5.3.1 Facility Type - Sewage Works

Select the type of facility that is the subject of the application (select all that apply). *

Sewage Treatment Plant (STP) Stormwater Management Facility

For the following, the applicant must complete and attach the relevant sections of the pipe data form:

Storm Sewers Ditches Combined Sewers
 Force mains Sanitary Sewers Pumping Station

Sewage Treatment Plant Details

Primary Secondary Tertiary
 Receives septage Constructed/Engineered Wetlands On-site system
 Lagoons (check all that apply below)

Septage Municipal Other (specify) _____

Facility Type

Municipal or private facility
Category: New 1 2 3 4

Please indicate the maximum design capacity of the municipal or private sewage treatment plant:

≤ 4,500 m³/day > 4,500 m³/day

Facility for the treatment of leachate
Category: New 1 2 3 4

Facility for the treatment of industrial process wastewater

Category: New 1 2 3 4

Facility for the disposal of non-contact cooling water

Subsurface disposal

Please indicate the design capacity of the subsurface disposal:

$\leq 15\text{m}^3/\text{day}$ $> 15\text{m}^3/\text{day}$ and $< 50\text{m}^3/\text{day}$ $> 50\text{m}^3/\text{day}$

Stormwater Management Facility Details

Category: * New 1 2 3 4

Pond Type *

Wet Pond Dry Pond Other (specify) * Oil & Grit Separator unit

What is the drainage area (in hectares) associated with the proposed activity? * 80.71

Does the applicant own all, or part of the drainage area? *

Applicant owns all of the drainage area

Applicant owns part of the drainage area

Applicant does not own the drainage area

For the drainage area land that the applicant does not own, does the applicant have an agreement with the owner(s) of the drainage area?

Yes No

What is the predominant type of land use in the drainage area? *

Rural or Agricultural

Commercial or Industrial

Residential

Is a Hydrogeological Assessment required? *

Yes No

(If yes, please attach the hydrogeological assessment.)

Is a review of effluent criteria assessment for stormwater management, cooling water or soil remediation facilities required? *

Yes No

(If yes, please attach the final effluent criteria accepted by the Regional Office of the Ministry.)

Is a review of effluent criteria assessment for municipal or private sewage, industrial process wastewater or leachate treatment plant required? *

Yes No

(If yes, please attach the final effluent criteria accepted by the Regional Office of the Ministry.)

Note: The Hydrogeological Assessment, effluent criteria, and surface water assessment must be discussed and prepared with the Ministry's regional technical support section during a pre-application meeting(s) and consultation(s) with the Ministry. A proof of concurrence from technical support must be included as part of the ECA application package.

Completion Status (5.3.1 Facility Type - Sewage Works)

5.3.2 Servicing

The works will provide sewage servicing for (select all that apply): *

Residential

Residential Type

Subdivision

Condominium

Institutional

Other (specify) _____

Is there a Municipal Responsibility Agreement in place?

Yes No N/A

(If yes, please attach a copy of the Municipal Responsibility Agreement.)

Commercial

Commercial Type

Hotel, Motel, Inn

Campground, Park

Rental Cabins

Resort

Shopping Malls

Restaurant

Highway Service Station/Gas Bars Other (specify) _____

Industrial

Describe _____

✓ Completion Status (5.3.2 Servicing)

5.3.3 Sewage Servicing for Waste Disposal/Landfill Sites

Does/Will the sewage treatment facility receive waste disposal/landfill site leachate? *

Yes No

If yes, please identify the site(s) below.

Name of Site Contributing Leachate	Environmental Compliance Approval Number	Volume of Leachate (m ³)
1.		

✓ Completion Status (5.3.3 Sewage Servicing for Waste Disposal/Landfill Sites)

✓ Completion Status (5.3 Sewage Works)

5.4 Waste Disposal Site

Note** - If the application is not for a waste disposal or processing site please proceed to Section 5.5

5.4.1 Facility Description - Waste Disposal Site (information on the nature of the proposed business or activity at this site)

Service Area

Total Area of Site (hectares)

Monitoring (select all that apply)

Groundwater

Surface Water

Landfill Gas

Leachate

None

Other (specify) _____

Type(s) of waste to be accepted at this site (select all that apply)

Subject:

Non-subject:

Hazardous Waste

Municipal (non-hazardous)

Liquid Industrial Waste

Other Liquid Waste

Municipal waste categories to be accepted at this site (select all that apply)

All Categories

Contaminated Soil

Domestic Sources

IC & I Sources

Source Separated Organics

Tires

Leaf and Yard Waste

Wood Waste

Blue Box Materials

Other (specify) _____

Other liquid waste categories to be accepted at this site (select all that apply)

- Processed Organics
 Hauled Sewage
 Waste from Food Processing/Preparation Operations
 Other (specify) _____

Hazardous Waste / Liquid Industrial Waste

| Class Code |
|------------|------------|------------|------------|------------|
| | | | | |

✓ Completion Status (5.4.1 Facility Description - Waste Disposal Site)

5.4.2 Waste Transfer/Processing/Composting - Complete this information if waste transfer and/or processing and/or composting take(s) place at this facility

Waste Type to be Transferred or Processed

- Hazardous waste or liquid industrial waste

Design Capacity

- ≤ 100 tonnes per day
 > 100 tonnes per day

- Waste other than hazardous waste and liquid industrial waste

Design Capacity

- ≤ 100 tonnes per day
 > 100 tonnes per day

Change to Operations

- No Change Proposed
 Change does not require fundamental design review
 Change requires fundamental design review

Liquid Waste

Maximum Storage Capacity (m³)

Hazardous	Liquid Industrial	Other Liquid Waste
-----------	-------------------	--------------------

Maximum Residual for Final Disposal (m³)

Hazardous		Liquid Industrial Waste		Other Liquid Waste	
Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)

Hazardous	Non-Hazardous
-----------	---------------

Maximum Residual for Final Disposal (tonnes)

Hazardous		Non-hazardous	
Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-hazardous

✓ Completion Status (5.4.2 Waste Transfer/Processing/Composting)

5.4.3 Thermal Treatment Facility - Complete this information if thermal treatment takes place at this facility

Waste Type for Thermal Treatment

Hazardous waste or liquid industrial waste

Design Capacity

≤ 100 tonnes per day > 100 tonnes per day

Waste other than hazardous waste and liquid industrial waste

Design Capacity

≤ 100 tonnes per day > 100 tonnes per day

Change to Operations

No Change Proposed

Change does not require fundamental design review

Change requires fundamental design review

Liquid Waste

Maximum Storage Capacity (m³)

Hazardous	Liquid Industrial	Other Liquid Waste
-----------	-------------------	--------------------

Maximum Residual for Final Disposal (m³)

Hazardous		Liquid Industrial Waste		Other Liquid Waste	
Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)

Hazardous	Non-Hazardous
-----------	---------------

Maximum Residual for Final Disposal (tonnes)

Hazardous		Non-hazardous	
Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-hazardous

Maximum Daily Feed Rate (tonnes/m³)

Hazardous Waste (tonnes)	Non-hazardous Waste (tonnes)	Liquid Industrial Waste (m ³)	Other Liquid Waste (m ³)
--------------------------	------------------------------	---	--------------------------------------

Completion Status (5.4.3 Thermal Treatment Facility)

5.4.4 Landfill Site - Complete this information if this facility operates as a landfill site

Waste Types to be accepted at the Landfill

Hazardous waste or liquid industrial waste

Design Capacity

≤ 40,000 m³ > 40,000 m³ ≤ 3 million m³ > 3 million m³

Waste is only uncontaminated tree stumps, leaves, branches, concrete and rocks

Design Capacity

≤ 40,000 m³ > 40,000 m³ ≤ 3 million m³ > 3 million m³

Waste other than hazardous waste and liquid industrial waste, other than uncontaminated tree stumps, leaves, branches, concrete and rocks.

Design Capacity

≤ 40,000 m³ > 40,000 m³ ≤ 3 million m³ > 3 million m³

Change to Operations

- No Change Proposed
- Change does not require fundamental design review or hydrogeological assessment
- Change requires fundamental design review or hydrogeological assessment

Note: The Hydrogeological Assessment, effluent criteria, and surface water assessment must be discussed and prepared with the Ministry’s regional technical support section during a pre-application meeting(s) and consultation(s) with the Ministry. A proof of concurrence from technical support must be included as part of the ECA application package.

Maximum Landfilling Capacity (m³)

Hazardous Waste	Non-hazardous Waste	Liquid Industrial Waste	Other Liquid Waste
-----------------	---------------------	-------------------------	--------------------

Maximum Amount of Waste to be Received

Hazardous Waste (tonnes)		Non-hazardous Waste (tonnes)		Liquid Industrial Waste (m³)		Other Liquid Waste (m³)	
Daily	Annually	Daily	Annually	Daily	Annually	Daily	Annually

Landfill Information

Area to be Landfilled (hectares)	Total Site Area including Buffer Area (hectares)
Estimated Date of Closure (yyyy/mm/dd)	Population Served

Control Types (select all that apply)

- Leachate Collected and Treated Off-site
- Leachate Collected and Treated On-site
- Landfill Gas Collected and Flared
- Landfill Gas Collected for Energy Generation
- Other (specify) _____

- ✓ Completion Status (5.4.4 Landfill Site)
- ✓ Completion Status (5.4 Waste Disposal Site)

5.5 Waste Management Systems (Except Mobile Waste Processing)

Note**- If the application is not for a waste management system please proceed to Section 5.7.

5.5.1 Fleet List (all vehicles and equipment to be used in the operation of the Waste Management System)

Year	Make	Model	Vehicle Identification Number (VIN)	License Plate Number	Province/State

Separate list attached?

Yes No

- ✓ Completion Status (5.5.1 Fleet List)

5.5.2 Vehicle Information

Are all the vehicles to be used owned by the applicant?

- Yes No

If no, please include additional information about ownership arrangements for each vehicle not owned by the applicant.

Has a minimum of \$1,000,000.00 liability insurance been obtained for all vehicles for which it is required?

- Yes No

Describe any additional insurances that are held (for example, environmental impairment liability insurance).

 Completion Status (5.5.2 Vehicle Information)

5.5.3 General Waste Management System

Type(s) of Waste to be Transported by the General Waste Management System (select all that apply)

Subject:

- Hazardous Waste
 Liquid Industrial Waste

Non-subject:

- Municipal (non-hazardous)
 Other Liquid Waste

Non-subject Categories to be Transported by the General Waste Management System (select all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Blue Box Materials | <input type="checkbox"/> Domestic Sources |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Non-Hazardous Solid Industrial |
| <input type="checkbox"/> Leaf/Yard Waste | <input type="checkbox"/> Wood Waste |
| <input type="checkbox"/> Spill Cleanup Material | <input type="checkbox"/> Contaminated Soil |
| <input type="checkbox"/> Tires | <input type="checkbox"/> Asbestos Waste in Bulk |
| <input type="checkbox"/> Waste Wash Water | <input type="checkbox"/> Grease Trap Waste |
| <input type="checkbox"/> Waste from Food Processing/ Preparation Operations | <input type="checkbox"/> Dewatered Catch Basin Clean-out Material |
| <input type="checkbox"/> Processed Organics (not for land application) | <input type="checkbox"/> Other (specify) _____ |

Subject Waste Categories to be Transported by the General Waste Management System

Hazardous Waste / Liquid Industrial Waste

| Class Code |
|------------|------------|------------|------------|------------|
| | | | | |

Separate list attached?

- Yes No

- All drivers are/will be trained in accordance with O. Reg. 347 and all pertinent environmental legislation.
 Each vehicle used to transport a specific subject waste class is suitable for that waste transportation in order to protect the health and safety of the public and the natural environment.

Note: For transporters of pathological waste and PCBs (waste classes 243 and 312) Operations Manual and Driver Training Manual must also be attached and Financial Assurance must be provided.

General Waste Management System - Disposal Site Information

What is the Final Destination of Waste to be Transported by the General Waste Management System? (select all that apply)

- A disposal site in Ontario approved by the Ministry of the Environment and Climate Change
 Disposal sites outside of Ontario approved by another regulatory agency

List the destination province(s)/state(s)

Province/State	Province/State	Province/State	Province/State

✓ Completion Status (5.5.3 General Waste Management System)

5.5.4 Soil Conditioner Waste Management System (includes non-agricultural source material (NASM) that is waste and processed organic waste (biosolids) destined for land application only)

Has the applicant received recommendation from Biosolids Utilization Committee (BUC) for land application of processed organic waste (biosolids) or NASM?

Yes If yes, please provide a copy of the BUC recommendation.

No If no, please clarify _____

Spreading equipment (land application only)

Equipment Type	Make and Model	Description

Separate list attached?

Yes No

Method of system operation (land application only)

Estimated quantity to be handled on an annual basis (cubic metres/litres/tonnes)

Please describe the loading procedures:

Please describe the spreading methods:

Please describe the storage facilities (tanks, lagoons, etc.):

Soil Conditioner Waste Management System - Land Application Sites

What is the final destination of waste to be transported by the soil conditioner waste management system? (must include for land application only)

Non-agricultural land

Agricultural land

Both agricultural and non-agricultural land

✓ Completion Status (5.5.4 Soil Conditioner Waste Management System)

5.5.5 Hauled Sewage (Septage) Waste Management System

Type(s) of hauled sewage (septage) to be transported

Portable toilet waste

Septic tank waste

Holding tank waste

Other (specify) _____

Spreading equipment (land application only)

Equipment Type	Make and Model	Description

Separate list attached?

Yes No

Does this system include in-transit storage?

Yes No

If yes:

a) What is the duration of storage? Please specify (Maximum period of in-transit storage should not exceed more than two weeks):

b) Is the storage tank a prefabricated tank with the capacity < 100,000 L, designed and constructed in accordance with a Class 5 Sewage System under the Ontario Building Code or CAN/CSA B66-05?

Yes No If no, please provide a copy of the design of the storage tank signed and dated by a professional engineer.

Does this system include in-transit processing?

Yes No

If yes:

a) Location of in-transit processing:

In Vehicle In-storage Tank

b) Describe the method of in-transit processing:

Does this system use barge/boat to transport hauled sewage (septage)?

Yes No

If yes:

a) Has a minimum of \$1,000,000.00 liability insurance been obtained for the barge/boat for which it is required?

Yes No

b) Does the barge/boat have an engine of 10 horsepower (hp) or more, for which a commercial vessel license is required from Transport Canada?

Yes No If yes, please include a copy of the commercial vessel license.

Note: For in-transit storage or processing the applicant must include with the application the consent of the landowner, if the landowner is different than the applicant. A financial assurance estimate must be provided by applicants using in-transit storage or using in-transit processing where processing is conducted in the in-transit storage tanks.

Hauled Sewage (Septage) Waste Management System - Land Application Sites N/A

List the Environmental Compliance Approval Number(s) of all disposal site(s) approved by the Ministry of the Environment and Climate Change for land application of hauled sewage in association with this waste management system.

Instrument Type	Instrument Number	Approval or Application Date (yyyy/mm/dd)

✓ Completion Status (5.5.5 Hauled Sewage (Septage) Waste Management System)

✓ Completion Status (5.5 Waste Management Systems (Except Mobile Waste Processing))

5.6 Waste Management System - Mobile Waste Processing

Note**: If the application is not for the use and operation of mobile waste processing equipment, proceed to Section 5.7

5.6.1 Mobile Waste Management System Process and Equipment Description

Type(s) of Waste to be Processed (select all that apply)

Subject:

- Hazardous Waste
- Liquid Industrial Waste

Non-subject:

- Municipal (non-hazardous)
- Other Liquid Waste

Type of Waste to be Processed by the Unit(s)	Number of Units	Financial Assurance (per unit)	Financial Assurance Required
Non-hazardous Solid Waste		\$5,000	
Hazardous Waste		\$20,000	
Liquid Industrial Waste		\$20,000	
Other Liquid Waste		\$20,000	
Multiple Types of Waste from the Categories Above		\$20,000	

Total Financial Assurance

Municipal (non-hazardous) Waste Categories to be Processed (select all that apply)

- Contaminated Soil at Cleanup Site
- Wood Waste
- Construction and Demolition Waste
- Asbestos Waste
- Tires
- Domestic Waste
- Other (specify) _____

Other Liquid Waste Categories to be Processed (select all that apply)

- Hauled Sewage
- Waste from Food Processing/Preparation Operations
- Processed Organic
- Other (specify) _____

Hazardous / Liquid Industrial Waste Types to be Processed

| Class Code |
|------------|------------|------------|------------|------------|
| | | | | |

✓ Completion Status (5.6.1 Mobile Waste Management System Process and Equipment Description)

5.6.2 Equipment Information - Please attach a separate list if more space is required.

Equipment List

Unit No.	Unit Type	Process Description	Equipment Type	Make	Model	Serial Number	Equipment Capacity (including unit of measurement)

Separate list attached?

- Yes No

✓ Completion Status (5.6.2 Equipment Information)

✓ Completion Status (5.6 Waste Management System - Mobile Waste Processing)

5.7 Cleanup of Contaminated Sites

Note** - If the application is not for a cleanup of a contaminated site please proceed to Section 6.

Type of Cleanup

- In-situ
- Ex-situ
- Both

Contaminated media to be treated:

Groundwater

Surface water

Sediment

Soil

Waste Type

Subject:

Hazardous Waste

Liquid Industrial Waste

Non-subject:

Municipal (non-hazardous)

Other Liquid Waste

Type of discharge

Air

Groundwater

Storm or sanitary

Surface water

Noise

Completion Status (5.7 Cleanup of Contaminated Sites)

6. Supporting Documentation and Technical Requirements

6.1 General

This is a list of supporting information to this application and is subject to the FIPPA and EBR.

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Proof of legal name	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Enhanced EBR description	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Provincial Officer Notice	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Inspection Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Detailed project and process description	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Pre-application Consultation Record	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Legal Survey(s)	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Site Plan(s)	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Scaled area location plan(s) with geo-referencing points identified	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Documentation in support of EBR Exception	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Proof of Compliance with EAA Requirements	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Proof of Consultation/Notification	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Financial Assurance Estimate	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Name, address and consent of land/site owner for the installation and operation of the proposed activity or storage location of equipment or vehicle	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Name, address and phone number of the Operating Authority	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of NEPDA Permit	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy/Proof of Municipal Planning Approval (ORMCA, general)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Municipal Zoning Confirmation Letter	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Zoning map	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Conservation Authority Clearance	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Director's approval for Policy 2 Deviation	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Application Fee	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
A copy of this application has been sent to the Ministry Local District Office	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>



Completion Status (6.1 General)

6.2 Air

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Emission Summary and Dispersion Modelling (ESDM) Report prepared in accordance with s. 22 and of O. Reg. 419/05 (including signed checklist)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Electronic copy of the Dispersion Modelling input and output files prepared in accordance with s. 26 of O. Reg. 419/05	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Supporting Information for a Maximum Ground Level Concentration Acceptability Request for Compounds with no Ministry POI Limit - Supplement to Application for Approval, EPA S. 9	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copies of forms requesting O. Reg. 419/05 instruments and supporting documentation	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.2 Air)

6.3 Noise and Vibration

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Primary Noise Screening	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Secondary Noise Screening	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Acoustic Assessment Report including signed checklist (AAR)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Vibration Assessment Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Noise Abatement Action Plan	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.3 Noise and Vibration)

6.4 Sewage Works

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Signed Municipal Responsibility Agreement	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Detailed description of the proposed activities/works	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Notice of Completion for the Environmental Study Report (ESR)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design Brief	Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Refer to stormwater management report	<input type="checkbox"/>
Preliminary Engineering Report	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Final Plans	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Engineering Drawings and Specifications	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Sewage quantity and quality characteristics	Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Refer to stormwater management report	<input type="checkbox"/>
Stormwater Management Report	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Stormwater Management Plan	Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Refer to stormwater management report	<input type="checkbox"/>
Hydrogeological Assessment with proof of concurrence from the Ministry's Regional technical support section	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Environmental Impact Analysis	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Final effluent criteria accepted with proof of concurrence from the Ministry's Regional Technical Support Section	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Sewage Works Limited Operational Flexibility Requirements - Engineer's Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Sewage Works Limited Operational Flexibility Requirements - Declarations	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Pipe Design Data Form	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.4 Sewage)

6.5 Waste Disposal Sites

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design and Operations Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Stormwater Management Report	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Hydrogeological Assessment with proof of concurrence from the Ministry's Regional technical support section	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Assessment of Physical and Water Use Conditions	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Waste Limited Operational Flexibility Requirements - Engineer's Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Waste Limited Operational Flexibility Requirements - Declarations	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of notification to adjacent landowners	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.5 Waste Disposal Sites)

6.6 Waste Management Systems

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Proof of vehicle and/or equipment ownerships	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Complete Fleet List (list of all vehicles, trailers and equipment used)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of the Liability Insurance for all vehicles for which insurance is required	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of BUC recommendation	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of the storage tank design	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of commercial vehicle licence	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Description of the physical location where the vehicles transporting biomedical waste are being disinfected	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Drivers Training Manual (for PCB/ Biomedical Waste)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
A copy of the applicant's Operation Plan including detailed packaging and biomedical waste handling methods	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Contingency and Emergency Procedures Plan (for PCB/ Biomedical Waste/Hauled Sewage (Septage))	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.6 Waste Management Systems)

6.7 Mobile Waste Processing N/A

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design and Operations Report - Mobile Waste Processing of General Waste	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Design and Operations Report - Mobile Waste Processing of Liquid Waste	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

 Completion Status (6.7 Mobile Waste Processing)

6.8 Cleanup of Contaminated Sites N/A

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design Report for Cleanup of Contaminated Sites	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

 Completion Status (6.8 Cleanup of Contaminated Sites)

6.9 Other Attachments N/A

Title	Reference	Confidential
		<input type="checkbox"/>

Is there an attachment of an additional list of attachments?

Yes No

If there is not enough space to list all of the attachments included in this application package, please include an additional listing of these attachments.

 Completion Status (6.9 Other Attachments)

6.10 Confidentiality

Attachment	Required, Optional or N/A	Attached?	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Explanation for confidentiality	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

 Completion Status (6.10 Confidentiality)

Please note: The collection of personal information in this application is necessary to administer the Ministry's approvals program, which is authorized pursuant to the *Environmental Protection Act* and the *Ontario Water Resources Act*. The personal information collected in this application will be used to administer the program, including for the purposes of the Ministry's compliance and enforcement activities under the aforementioned acts, and for the purposes of making information in respect of Environmental Compliance Approvals available to the public with the exception of payment information. Questions about the collection of the information can be directed to a Client Service Representative, Client Services and Permissions Branch, 135 St. Clair Avenue West, 1st Floor, Toronto ON M4V 1P5; Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001 or Fax 416-314-8452.

7. Authorization

7.1 Statement of the Applicant

I am authorized to prepare and submit this application and to make this certification. I have reviewed the complete application and I have made all inquiries that are necessary to declare to the best of my knowledge, information and belief:

- The information contained in this application is complete and accurate.
- The Technical Contact(s) identified in this application has/have been authorized to prepare certain technical material, and act on behalf of the applicant to discuss this application with the Ministry of the Environment and Climate Change and to provide additional information about this application to the Ministry on request.
- The information provided to the Technical Contact(s) in relation to this application is complete and accurate.

Name of Signing Authority (Please print) *

Steven Libfeld

Title *

CEO

Telephone Number

905-839-3500

ext.

Mobile Number

416-670-9116

Fax Number

Email Address

steve.l@mytribute.ca

Signature



Date (yyyy/mm/dd)

2020/11/27

✓ Completion Status (7.1 Statement of the Applicant)

7.2 Statement of the Municipality N/A

I, the undersigned hereby declare on behalf of the Municipality, that the Municipality has no objection to the construction of the works in the Municipality.

Name (Please print) *

Title *

Township of Adjala-Tosorontio

Signature

Date (yyyy/mm/dd)

✓ Completion Status (7.2 Statement of the Municipality)

7.3 Statement of Technical Contacts

Technical Contact 1

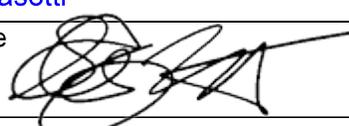
I have been authorized by the applicant to prepare the technical materials for the area(s) of responsibility identified in section 2.6 that are included in the application. I have reviewed those technical materials and I have made all inquiries that are necessary to declare to the best of my knowledge, information and belief:

- The technical materials contained in this application in respect of the area(s) of responsibility identified in section 2.6 are complete and accurate.
- I have the relevant education and experience necessary to provide this certification.

Name of Technical Contact (Please print) *

Geoff Masotti

Signature



Date (yyyy/mm/dd)

2020/11/27

✓ Completion Status (7.3 Statement of Technical Contacts)

8. Payment Information - Application for an Environmental Compliance Approval

Please Note:

1. If this form has been completed by hand, the fee calculations must be completed and attached separately. The supplemental fee calculations do not need to be included if this form has been completed electronically.
2. If this form has been completed electronically, the fees for this application have been calculated based on the information provided. The Ministry may require additional information during the review of the application that could impact the total fee required.
3. All fees should be paid in Canadian funds, payable to the *Minister of Finance*, except fees for *Transfer of Review*, which are payable to the local municipality.
4. Credit card payments are accepted for payments under \$10,000 only. **Never email credit card information.**
5. If payment is being made by certified cheque or money order, please staple the payment to this page.
6. The information collected in this section of the form is considered confidential and will only be used to process the application fee.
7. To protect credit card information, do not submit this page containing payment information via e-mail or any other electronic means if it includes credit card information. Credit card information should be submitted only by mail, facsimile, or hand-delivery. Applications containing payment information that are submitted via e-mail or any other electronic means will not be processed and will be destroyed.

Do not include this page in the copies of the application that are being provided to the Local Ministry District Office.

Amount Enclosed

Method of Payment *

Certified Cheque Money Order VISA MasterCard

Credit Card Information (if paying by VISA or MasterCard)

Name of Cardholder (Please print)

Card Number

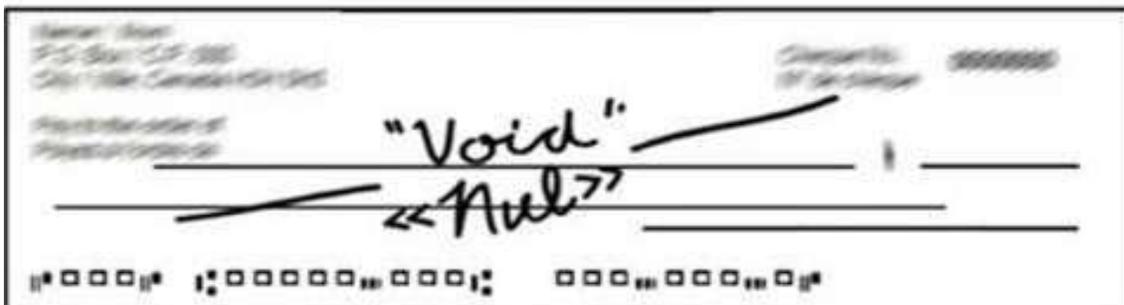
Expiry Date (mm/yy)

Card Holder's Signature

Date (yyyy/mm/dd)

✓ Completion Status (8 Payment Information)

If paying by certified cheque or money order, please attach it here.



Application Summary

For Office Use Only			
Reference Number	Payment Received (\$)	Date (yyyy/mm/dd)	Initials

Applicant Name

Tribute Colgan 1 Limited

Project Name

Tribute Colgan 1 - SWM

Project Description Executive Summary

The proposed development consists of 315 residential units. A portion of the site will be allocated to institutional uses as well as area for roads, parks, open space, and a stormwater management pond. In total, the area of the lot is 80.71 ha (199.44 ac).

Quality and quantity control of internal storm runoff will be provided such that the post development flows do not exceed pre development conditions for all storms up to and including 100 year events, and MECP Enhanced Protection quality control is provided. Stormwater quantity and quality criteria will be met via a storm water management pond in the north area of the site. Groundwater will also be collected in the storm sewer system. The groundwater flows will bypass the pond and be treated with an Oil & Grit Separator prior to discharging to the site outlet.

This application is for the stormwater management facilities in the Tribute Colgan 1 Development.

Supplemental Application Information

Enclosed for your review and approval is an application for the proposed stormwater management pond and Oil & grit separator at the above noted development. This application package includes the following:

- 1) A completed and signed (Applicant and Municipality) application form;
- 2) One bound sets of drawings;
- 3) Articles of Incorporation for the Applicant;
- 4) Servicing and Stormwater Management Implementation Report; and,
- 5) An application fee in the amount of \$2200.

A complete package has also been submitted to the district office in Barrie.

Should you have any questions or concerns regarding the information provided, please do not hesitate to contact our office.

Application Status

Section	Completed?			
1. Application Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
2. Project Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
3. Regulatory Requirements	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
4. Site Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5. Facility Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6. Supporting Documentation	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
7. Payment Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
8. Authorization	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Fee Summary

Activity	Amount (\$)
Administrative Processing	\$200.00
Review of EPA s. 9 activities	\$0.00
Review of EPA s. 27 activities	\$0.00
Review of OWRA s. 53 activities	\$2,000.00
Total Fee	\$2,200.00

The Ministry may request additional fees upon review of this application.

If this form is submitted in print version only and the smart calculation feature is not used, please attach the fee calculation separately.

Table of Contents

General Information and Instructions 1

1 Applicant Information 2

- 1.1 Applicant Information 2
- 1.2 Applicant Physical Address 2
- 1.3 Applicant Mailing Address 2

2 Project Information 4

- 2.1 Project Name and Description 4
- 2.2 Application Type 5
- 2.3 Project Type. 6
- 2.4 Approval Information 6
- 2.5 Other Approval/Permits for Facility 7
- 2.6 Technical Contacts 7

3 Regulatory Requirements 9

- 3.1 Environmental Bill of Rights (EBR)
- 3.2 *Environmental Assessment Act* (EAA)
- 3.3 Consultation/Notification 10

4 Site Information 13

- 4.1 Site Address or Storage Location 13
- 4.2 Site or Storage Location Information 13
- 4.3 Site Zoning and Classification 14
- 4.4 Point of Entry into Ontario 14
- 4.5 Source Protection/Drinking Water Threats 15
- 4.6 Receiver of Effluent Discharge 15

5 Facility Information 17

- 5.1 Air 17
- 5.2 Noise 18
- 5.3 Sewage Works 19
- 5.4 Waste Disposal Site 21
- 5.5 Waste Management Systems
- 5.6 Waste Management System –
- 5.7 Cleanup of Contaminated Sites 29

6 Supporting Documentation

- 6.1 General 30
- 6.2 Air. 31
- 6.3 Noise and Vibration 31
- 6.4 Sewage Works 31
- 6.5 Waste Disposal Sites 32
- 6.6 Waste Management Systems 33
- 6.7 Mobile Waste Processing 34
- 6.8 Cleanup of Contaminated Sites 34
- 6.9 Other Attachments 34
- 6.10 Confidentiality 34

7 Authorization 35

- 7.1 Statement of the Applicant 35
- 7.2 Statement of the Municipality 35
- 7.3 Statement of Technical Contacts 35

8 Payment Information 36

Application Summary 38

General Information and Instructions

General Information

Information requested in this form is collected under the authority of the *Environmental Protection Act* (EPA), *Ontario Water Resources Act* (OWRA) and Environmental Bill of Rights (EBR), and will be used to evaluate applications for Environmental Compliance Approvals (ECAs) issued under Part II.1 of the EPA. This application form should not be used for mobile PCB destruction facilities.

For all questions related to preparing or submitting this form or about the Ministry's collection of information related to applying for an ECA, contact:

Client Services and Permissions Branch
135 St. Clair Ave. West, 1st Floor
Toronto Ontario M4V 1P5
Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions

1. Applicants are responsible for ensuring that they complete the most recent application form. Application forms and information about the required supporting documentation and technical requirements are available from the Client Services and Permissions Branch (the address and phone number are provided in the General Information on this page). As well, you can get this information from your local District Office of the Ministry of the Environment and Climate Change, and online at: <https://www.ontario.ca/page/environmental-approvals>
2. A complete application consists of:
 - a completed and signed application form;
 - all required supporting documents and technical requirements identified in:
 - i. this form,
 - ii. Ministry guidance,
 - iii. the Applications for Environmental Compliance Approvals regulation, and
 - payment of the application fee (in Canadian funds) by certified cheque or money order made payable to the Minister of Finance, or credit card payment (for payments up to \$10,000). For Transfer of Review, make the cheque or money order payable to the appropriate municipality. **The Ministry may return or refuse incomplete applications to the applicant.** The Director may require additional information of any application initially accepted as complete.
3. Submit the complete application as follows:
 - One (1) paper copy (unless the application is a Transfer of Review), one (1) electronic copy and the fee to the Director, Client Services and Permissions Branch at the address provided in the General Information on this page.
 - If the application is a Transfer of Review, the applicant must submit two (2) copies of the completed application and the fee to the designated municipal authority.
4. The applicant must also send a copy of the application without the fee to the local Ministry District Office that has jurisdiction over the area where the facilities are located. DO NOT send payment to the District Office.
 - To locate the appropriate local Ministry District Office, visit the Ministry of the Environment and Climate Change website at: <http://www.ontario.ca/environment-and-energy/ministry-environment-and-climate-change-regional-and-district-offices>
5. For Waste Disposal Sites the applicant must also send a copy of the application without the fee to the Clerk's office of the local municipality (both upper and lower tier) in which the facility/proposed facility is located unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality. DO NOT send any payment information to the municipality.

Information collected by the Ministry of the Environment and Climate Change is subject to the *Freedom of Information and Protection of Privacy Act (FIPPA)*. If the applicant is of the view that any part of the application is confidential on the grounds that such information constitutes a trade secret or scientific, technical, commercial, financial or labour relations information, please make this known now. Otherwise, the Ministry may make the information available to the public without further notice to the applicant.

It is an offence under the EPA and OWRA to provide false or misleading information in this application and/or accompanying documents.

Complete the sections as shown below.

- Section 1: Applicant Information
- Section 2: Project Information
- Section 3: Regulatory Requirements
- Section 4: Site Information
- Section 5: Facility Information
- Section 6: Supporting Documentation
- Section 7: Payment Information
- Section 8: Authorization

Fields marked with an asterisk (*) are mandatory.

1. Applicant Information

1.1 Applicant Information

Applicant Type *

- Corporation Individual Federal Government Municipal Government
 Partnership Provincial Government Sole Proprietor
 Other (specify) _____

Applicant Name (Legal name of individual or organization as evidenced by legal documents) *

[Tribute Colgan 2 Limited](#)

Select if Business Name same as Applicant Name

Business Name *

[Tribute Colgan 2 Limited](#)

Business Number *

[771867496](#)

Business Website Address

Primary North American Industry Classification System (NAICS) Code *

[237210](#)

Other NAICS Code

Separate list attached?

Yes No

Business Activity Description

 Completion Status (1.1 Applicant Information)

1.2 Applicant Physical Address

Address Type? *

Civic Address Survey Address

Civic Address

Unit Number 1	Street Number * 1815	Street Name * Ironstone Manor
------------------	-------------------------	----------------------------------

Survey Address

Enter Lot and Concession or Part and Reference Plan

Lot	Concession	Part	Reference Plan
-----	------------	------	----------------

Municipality/Unorganized Township * Pickering		County/District		
Province/State * Ontario		Country * Canada		Postal/Zip Code * L1W 3W9
Telephone Number * 905-839-3500	ext.409	Fax Number	Mobile Number	Email Address * frank.z@mytribute.ca

Geo Reference

Description of location	Map Datum	Zone	Accuracy Estimate	Geo-Referencing Method	UTM Easting	UTM Northing
Southwest corner of property	NAD83	17	25	GoogleMaps	651,420.64	4,852,830.94
Physical location of front door or main entrance	NAD83	17	25	GoogleMaps	651,452.47	4,852,913.79

✓ Completion Status (1.2 Applicant Physical Address)

1.3 Applicant Mailing Address

Select if same as Physical Address

Unit Number 1	Street Number * 1815	Street Name * Ironstone Manor
------------------	-------------------------	----------------------------------

Delivery Designator	Delivery Identifier	Postal Station
---------------------	---------------------	----------------

Municipality/Unorganized Township * Pickering		County/District		
Province/State * Ontario		Country * Canada		Postal/Zip Code * L1W 3W9
Telephone Number * 905-839-5300	ext.409	Fax Number	Mobile Number	Email Address * frank.z@mytribute.ca

✓ Completion Status (1.3 Applicant Mailing Address)

2. Project Information

2.1 Project Name and Description

Project Name *

Tribute Colgan 2

Project Description Executive Summary *

The proposed development consists of 329 residential units and a retirement home complete with 170 beds. There will also be a commercial block within the development. A portion of the site will be allocated to area for roads, open space, and a stormwater management pond as well as a wastewater treatment plant. In total, the area of the lot is 39.86 ha.

Quality and quantity control of internal storm runoff will be provided such that the post development flows do not exceed pre development conditions for all storms up to and including 100 year events, and MECP Enhanced Protection quality control is provided. Stormwater quantity and quality criteria will be met via a storm water management pond on the west side of the site. Groundwater will also be collected in the storm sewer system. The groundwater flows will bypass the pond and be treated with an Oil & Grit Separator prior to discharging to the site outlet.

This application is for the stormwater management facilities in the Tribute Colgan 2 Development.

Supplemental Application Information (select information button for required information for this field) *

Enclosed for your review and approval is an application for the proposed stormwater management pond and oil & grit separator at the above noted development. This application package includes the following:

- 1) A completed and signed (Applicant and Municipality) application form including "Pipe Data Form - Supplemental to Application for Approval for Sewage Works";
- 2) Two bound sets of drawings;
- 3) Articles of Incorporation for the Applicant;
- 4) Servicing and Stormwater Management Implementation Report; and,
- 5) An application fee in the amount of \$2200.

A complete package has also been submitted to the district office in Barrie.

Should you have any questions or concerns regarding the information provided, please do not hesitate to contact our office.

✓ Completion Status (2.1 Project Name and Description)

2.2 Application Type

Type *

- | | |
|---|---|
| <input checked="" type="checkbox"/> New ECA | <input type="checkbox"/> Amendment to existing ECA |
| <input type="checkbox"/> Revocation of existing ECA | <input type="checkbox"/> Administrative amendment to existing ECA |
| <input type="checkbox"/> Application for renewal of limited operational flexibility | <input type="checkbox"/> Consolidation of existing ECAs |

Is this application for the addition of a new project type to the site or a new municipal waste category/class code to the waste management systems or a new sewage facility type?

Yes No

Is this application for Transfer of Review? *

Yes No

✓ Completion Status (2.2 Application Type)

2.3 Project Type

Project Type (Select all that apply) *	Limited Operational Flexibility?	Pilot Project?
<input type="checkbox"/> Air - Stationary	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Air - Mobile	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Noise	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Vibration	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Landfill site	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Transfer site	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Processing site	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Composting site	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Disposal Site - Thermal Treatment site	N/A	<input type="checkbox"/>
<input type="checkbox"/> Sewage - Industrial	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Sewage - Municipal	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Sewage - Private	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System – General Waste Management System	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System - Hauled Sewage (Septage)	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System – Soil Conditioner for transport to a site for Application on Land	N/A	<input type="checkbox"/>
<input type="checkbox"/> Waste Management System - Mobile Waste Processing	N/A	<input type="checkbox"/>
<input type="checkbox"/> Cleanup of contaminated sites - Mobile	N/A	<input type="checkbox"/>
<input type="checkbox"/> Cleanup of contaminated sites - Site specific	N/A	<input type="checkbox"/>

Completion Status (2.3 Project Type)

2.4 Approval Information

Application initiated by *

- Applicant
 S. 20.18 Order (attach copy)
- Condition of existing approval
 Provincial Officer Order (attach copy)
- Inspection Report (attach copy)
 Other (specify) _____

Current Environmental Compliance Approvals that may be changed or amended by this application: N/A

Environmental Compliance Approval Number	Date of Issuance (yyyy/mm/dd)

Separate list attached?

- Yes No

Proposed Environmental Compliance Approvals related to this project: N/A

Project Type	Ministry Reference Number (if applicable)	Have Submitted	Have not Submitted
Project Type	Ministry Reference Number (if applicable)	Have Submitted	Have not Submitted
		<input type="checkbox"/>	<input type="checkbox"/>

Separate list attached?

Yes No

 Completion Status (2.4 Approval Information)

2.5 Other Approval/Permits for Facility N/A

List all other instruments (approvals or permits) issued by the Ministry of the Environment and Climate Change or applied for under the *Environmental Protection Act*, *Environmental Assessment Act*, *Ontario Water Resources Act* and *Safe Drinking Water Act, 2002* and any Environmental Activity and Sector Registrations that are relevant to this application.

Instrument Type	Instrument Number/ Application Reference Number	Approval or Application Date (yyyy/mm/dd)

Separate list attached?

Yes No

List all other instruments (approvals or permits) issued by an agency, municipality or another ministry that are relevant to this application.

Issuing Agency	Approval or Permit Name	Approval or Permit Number	Issued Date (yyyy/mm/dd)

Separate list attached?

Yes No

 Completion Status (2.5 Other Approval/Permits for Facility)

2.6 Technical Contacts

Technical Contact 1

Area of Responsibility (Select all that apply) *

Air Noise/Vibration Sewage Waste

Name of Technical Contact

Last Name *

Masotti

First Name *

Geoff

Company *

C.F. Crozier & Associates

Address Information

Select if same as Applicant Mailing Address

Civic Address

Unit Number

Street Number *

57

Street Name *

John Street West

Delivery Designator

Delivery Identifier

Postal Station

Municipality/Unorganized Township *

Bradford

County/District

Province/State *		Country *		Postal/Zip Code *
Ontario		Canada		L3Z2B4
Telephone Number *	Fax Number	Mobile Number	Email Address *	
905-952-3111 ext.			gmassoti@cfcrozier.ca	

✓ Completion Status (2.6 Technical Contacts)

3. Regulatory Requirements

3.1 Environmental Bill of Rights (EBR) Requirements

Is this a proposal for a prescribed instrument under the EBR? *

Yes No

If yes, is this proposal exempted from the EBR requirements? *

Yes No

If yes, please check one of the following (Please provide supporting information.) *

This proposal has been considered in a substantially equivalent process of public participation. (EBR, 1993, s.30.)

Was the public participation process carried out in fulfillment of the requirements related to an approval under the *Planning Act*? *

Yes No

If yes, was the *Planning Act* approval related to a plan of subdivision? *

Yes No

This proposal is for an emergency situation. (EBR, 1993, s. 29.)

This proposal is for an amendment to or revocation of an existing Environmental Compliance Approval that is not environmentally significant. (EBR, 1993, s. 22 (3).)

This proposal has been subject to or exempted from EAA Requirements or considered in a decision of a tribunal. (EBR, 1993, s. 32.)

 Completion Status (3.1 Environmental Bill of Rights (EBR) Requirements)

3.2 Environmental Assessment Act (EAA) Requirements

Is the proposed undertaking subject to the requirements of the EAA? *

Yes No

If yes, please select one of the following:

The proposed undertaking has fulfilled the requirements of the EAA through the completion of a Class EA process

Name of Class EA _____

Schedule/Group/Category (if applicable) _____

If applicable, please submit a copy of the proof of completion (for example, Notice of Completion).

Was the undertaking subject of a Part II Order request(s)?

Yes No

If yes, please submit a copy of the Director's or Minister's decision letter.

The proposed undertaking has fulfilled all of the requirements for the EAA through:

Select all that apply:

completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the EAA

completion of an Environmental Screening Process pursuant to O. Reg. 116/01 of the EAA

Was the undertaking subject of an elevation request(s)?

Yes No

If yes, please submit a copy of the Director's decision letter. If an appeal was made to the Director's decision, please also submit a copy of the Minister's decision letter.

completion of an Environmental Screening Process pursuant to O. Reg. 231/08 of the EAA

Was the undertaking subject of an objection(s)?

Yes No

If yes, please submit a copy of the Minister's decision letter.

The proposed undertaking has fulfilled the requirements of the EAA through the completion of an individual Environmental Assessment.

Please submit a copy of the signed Notice of Approval.

Was the undertaking exempted from the requirements of the EAA? *

Yes No

The proposed undertaking has fulfilled the requirements of the EAA through an exemption provided under:

Select one of the following *

Section * 2 of Ontario Regulation No. * 345/93 or

Declaration/Exemption Order Number _____

If Regulation, Declaration Order or Exemption Order does not refer directly to this undertaking, please provide supporting documentation to explain why it applies to this facility

Completion Status (3.2 *Environmental Assessment Act* (EAA) Requirements)

3.3 Consultation/Notification

Indigenous Consultation:

Is the proposed project/activity on Crown land or does/would it alter access to Crown land? * Yes No

Is the proposed project/activity in an open or forested area where hunting, trapping or plant gathering could occur? * Yes No

Does the proposed project/activity involve the clearing of forested land? * Yes No

Could the proposed project/activity impact a water body (e.g., direct discharge) or alter access to a water body? * Yes No

Could the proposed project/activity impact cultural heritage or archaeological resources, or access to them? * Yes No

Is the proposed project/activity adjacent or close to a First Nation Reserve? * Yes No

Is the applicant aware of any concerns from Indigenous communities about this proposed project/activity? * Yes No

Were there conditions placed, or direction provided, in another (or previous) permit or approval for consultation in relation to this project/activity? * Yes No

Based on the online Guide to Applying for an Environmental Compliance Approval, or direction provided by the ministry or another agency, are Indigenous consultation activities likely required as part of this application process? * Yes No

If Yes to the question above, please describe the consultation/notification activities undertaken for this application or as part of another process (e.g., EAA) in relation to the proposed project/activity, including a summary of the notification/consultation, First Nation and Métis communities contacted, key issues raised and how they were addressed, any changes to the project as a result of these activities, and any planned consultation/notification activities in the future.

Please attach supporting documents (e.g., record of consultation, delegation letter and/or direction provided by the Crown, materials provided to communities, meeting notes and agendas, correspondence with communities as appropriate).

If the applicant has determined that consultation with First Nation and Métis communities is not likely required for the proposed project/activity, please provide a rationale why: *

Neither First Nation nor Metis communities are present in the vicinity of the project site.

Other Consultation/Notification:

Has the applicant had a ministry pre-application consultation in relation to the proposed project? *

Yes No

If this application is for a waste disposal site, have the neighbour notification requirements been completed?

Yes No

If yes, please attach a Public Consultation/Notification Report that includes the notice and list of recipients.

If no, please select the reason for not undertaking neighbour notification:

Application is for an administrative amendment

The proposal was subject to public consultation through an Environmental Assessment process

other , please explain _____

Are there any other consultation/notification activities that have been undertaken to fulfill requirements by other legislation or through voluntary efforts? *

Yes No

If yes, please:

1. describe the consultation/notification activities below; and
 2. attach documents describing each of these consultation\nnotification activities, any changes to the project as a result of these activities and any planned consultation/notification activities in the future.
-

 Completion Status (3.3 Consultation/Notification)

4. Site Information

4.1 Site Address or Storage Location

Will the vehicles or equipment be stored at more than one location?

Yes No

(If yes, please enter all vehicle or equipment storage locations below and attach separate list, as necessary.)

Select if same as Applicant Physical Address

Address Type? *

Civic Address Survey Address

Primary Civic Address

Unit Number	Street Number	Street Name

Additional Civic Addresses

Unit Number	Street Number	Street Name

Separate list attached?

Yes No

Primary Survey Address

Enter Lot and Concession or Part and Reference Plan *

Lot *	Concession *	Part	Reference Plan
11	7		

Additional Survey Address

Enter Lot and Concession or Part and Reference Plan

Lot	Concession	Part	Reference Plan

Separate list attached?

Yes No

Municipality/Unorganized Township *	County/District
Adjala-Tosorontio	Simcoe

Province/State *	Country *	Postal/Zip Code *
Ontario	Canada	L0G1W0

Non-address Information (includes any additional information to clarify the physical location)

Geo Reference (required)

Select if same as Applicant Physical Geo Reference

Description of location	Map Datum *	Zone *	Accuracy Estimate *	Geo-Referencing Method *	UTM Easting *	UTM Northing *
Southwest corner of property	NAD83	17	25	GoogleMaps	591,402.61	4,875,734.85
Physical location of front door or main entrance	NAD83	17	25	GoogleMaps	591,762.59	4,875,796.83

✓ Completion Status (4.1 Site Address or Storage Location)

4.2 Site or Storage Location Information

Site Name *

Tribute Colgan 2

Days and Hours of Operation *

N/A

Ministry of the Environment and Climate Change District Office *

Barrie District Office

Is the site (property) that is the subject of this application owned by the applicant? *

Yes No

If no, please include the owner's name, address and a signed document indicating that the applicant has the authority to install and operate the proposed activity, or store vehicles or equipment on the land.

Is the applicant the operating authority of the site that is the subject of this application? *

Yes No

If no, please include the operating authority name, address and phone number.

Is the site located in an area of development control as defined by the *Niagara Escarpment Planning and Development Act* (NEPDA)? *

Yes No

If yes, please attach a copy of the NEPDA permit for proposed activity.

Is the site within an area covered by the Oak Ridges Moraine Conservation Plan? *

Yes No

If yes, please attach proof of municipal planning approval for the proposed activity/work (for example, zoning by-law, letter from municipality, etc.).

Completion Status (4.2 Site or Storage Location Information)

4.3 Site Zoning and Classification N/A

Current Land Use *

Agricultural

Official Plan Designation *

Residential

Current Zoning (Please attach zoning map, if available.) *

Hamlet residential, institutional, open space

Adjacent Land Use (select all that apply) *

Industrial

Agricultural

Commercial

Recreational

Residential

Other (specify) _____

Adjacent Land Zoning *

Rural, Hamlet Residential, Agricultural

Does the current zoning permit the proposed activity? *

Yes No

Does the applicant have correspondence from the municipality to confirm that the current zoning of the property permits the proposed use? *

Yes No If yes, please attach correspondence from the municipality.

Does the official plan designation support the proposed activity? *

Yes No N/A

Completion Status (4.3 Site Zoning and Classification)

4.4 Point of Entry into Ontario N/A

(for waste management system vehicles that are stored at an address outside of Ontario)

City in closest proximity to the point of entry

Description of Point of Entry

Completion Status (4.4 Point of Entry into Ontario)

4.5 Source Protection/Drinking Water Threats (sewage or waste disposal site applications only) N/A

Check the source protection area(s) where the activity is/will be located *

- | | | |
|---|--|--|
| <input type="checkbox"/> Ausable Bayfield | <input type="checkbox"/> Cataraqui Region | <input type="checkbox"/> Catfish Creek |
| <input type="checkbox"/> Central Lake Ontario | <input type="checkbox"/> Credit Valley | <input type="checkbox"/> Crowe Valley |
| <input type="checkbox"/> Essex | <input type="checkbox"/> Ganaraska | <input type="checkbox"/> Grand River |
| <input type="checkbox"/> Grey Sauble | <input type="checkbox"/> Halton | <input type="checkbox"/> Hamilton |
| <input type="checkbox"/> Kawartha-Haliburton | <input type="checkbox"/> Kettle Creek | <input type="checkbox"/> Long Point |
| <input type="checkbox"/> Lakehead | <input type="checkbox"/> Lake Simcoe and Couchiching/Black River | <input type="checkbox"/> Lower Trent |
| <input type="checkbox"/> Lower Thames Valley | <input type="checkbox"/> Maitland Valley | <input type="checkbox"/> Mattagami |
| <input type="checkbox"/> Mississippi Valley | <input type="checkbox"/> Niagara | <input type="checkbox"/> North Bay Mattawa |
| <input type="checkbox"/> Northern Bruce Peninsula | <input checked="" type="checkbox"/> Nottawasaga Valley | <input type="checkbox"/> Rideau Valley |
| <input type="checkbox"/> Raisin Region | <input type="checkbox"/> South Nation | <input type="checkbox"/> Saugeen Valley |
| <input type="checkbox"/> Sault Ste. Marie | <input type="checkbox"/> Severn Sound | <input type="checkbox"/> Sudbury |
| <input type="checkbox"/> St. Clair Region | <input type="checkbox"/> Toronto and Region | <input type="checkbox"/> Otonabee-Peterborough |
| <input type="checkbox"/> Outside a source protection area | <input type="checkbox"/> Quinte | <input type="checkbox"/> Upper Thames River |

Is the proposed activity located or planned to be located in a vulnerable area identified in a local assessment report source protection plan under the *Clean Water Act, 2006*? *

Yes No

If yes, what is/are the vulnerable area(s)/zone(s)? *

- Wellhead Protection Areas Surface Water Intake Protection Zones Highly Vulnerable Aquifers
 Significant Groundwater Recharge Areas

Is the activity being applied for identified as a significant drinking water threat in the assessment report for the local source protection area? *

Yes No

Completion Status (4.5 Source Protection/Drinking Water Threats)

4.6 Receiver of Effluent Discharge (sewage applications only) N/A

Intermediate Receiver Name *

Bailey Creek

Watershed Name *

Nottawasaga Valley

Type of Receiver *

Surface Water Groundwater Other (specify) _____

Has the facility received local Conservation Authority clearance? (for stormwater management facility discharging to the natural environment) *

Yes No

If yes, please include a copy of the Conservation Authority clearance.

Final Receivers N/A

Will the proposed activity discharge sewage to any of the following critical receivers? *

Lake Simcoe

Rideau River

Detroit River

Great Lakes

Rouge River

Bay of Quinte

Other (specify) _____

Is the receiver a Policy 2 receiver? *

Yes No

Does the applicant have a Policy 2 deviation approval from the directors?

Yes No

If yes, please attach a copy of the Director's approval.

Completion Status (4.6 Receiver of Effluent Discharge)

5. Facility Information

5.1 Air Note** - If the application does not have air emissions please proceed to Section 5.2

[Information](#)

5.1.1 Summary of Equipment that Discharges Contaminants to the Air

Select Type of Equipment	Number of Pieces of Equipment
<input type="checkbox"/> Combustion equipment that uses natural gas, propane, no. 2 oil, landfill gas or sewage treatment gas for fuel for the purpose of providing comfort heating or emergency power, producing hot water or steam, or heating material in a system that does not discharge to the atmosphere (Total Heat input of all units: $\leq 50,000,000$ kJ/hr)	N/A
<input type="checkbox"/> Storage tanks	N/A
<input type="checkbox"/> Welding operations that use a maximum of 10 kilograms of welding rod per hour	N/A
<input type="checkbox"/> Combustion equipment that uses waste-derived fuel for the purpose of providing comfort heating, burning ≤ 15 litres per hour	
<input type="checkbox"/> Heat cleaning ovens used for parts cleaning and associated parts washers or degreasing equipment, other than solvent degreasing equipment	
<input type="checkbox"/> Cooling towers	
<input type="checkbox"/> Equipment used to control emissions of contaminants, other than a fume incinerator	
<input type="checkbox"/> Laboratory fume hoods	
<input type="checkbox"/> Paint spray booths and associated equipment that have a design capacity of up to 8 litres per hour of paint	
<input type="checkbox"/> Grain dryers	
<input type="checkbox"/> Any other equipment not listed above with a flow rate of less than or equal to 1.5 m ³ /second	
<input type="checkbox"/> Any other equipment not listed above with a flow rate of greater than 1.5 m ³ /second	
<input type="checkbox"/> Equipment that is subject to an Environmental Compliance Approval, and from which there is no proposed increase in the discharge of any contaminant that was previously reviewed by the Director.	N/A

Completion Status (5.1.1 Summary of Equipment that Discharges Contaminants to the Air)

5.1.2 Emission Summary and Dispersion Modelling (ESDM) Report

Is the review of an existing, approved ESDM required as part of this proposed application?

Yes No

If yes, identify the number of emission sources described in the existing ESDM Report that emit contaminants in common with the sources forming the subject of the application (if none, enter zero).

Have all of these emission sources been described in an ESDM Report that was previously reviewed as part of an application for an existing Environmental Compliance Approval?

Yes No

Completion Status (5.1.2 ESDM Report)

5.1.3 O. Reg. 419/05 Requirements

Which of the following sections of O. Reg. 419/05 applies to the facility?

s.19 (Schedule 2)

s. 20 (Schedule 3)

Does not apply. Please indicate reason _____

Has an instrument under O. Reg. 419/05 been issued?

Yes No

If yes, what type(s) of instruments (including any notices, orders or approvals) has (have) been issued? (select all that apply)

ss. 4(2) Adjacent Properties

ss. 7(1) Specified Dispersion Models

ss. 8(2) Negligible Sources

ss. 10(2) Operating Conditions

ss. 11(2) Refined Emission Rates

ss. 13.1 Value of Dispersion Modeling Parameters

ss. 13(1) Meteorological Data

ss. 14(6) Area of Modelling Coverage

ss. 20(4) Speed-up Request

ss. 20(5) Speed-up Order

s. 35 Site-specific Standard

ss. 35(14) Site-specific Standard Order

ss. 39(3) Technical Standard Registration (Industry Standard)

ss. 39(4) Technical Standard Registration (Equipment Standard)

Other (list all that have been issued) _____

Is an instrument under O. Reg. 419/05 being requested as part of this application?

Yes No

If yes, what type(s) of notice, order or approval is (are) being requested?

ss. 7(1) Specified Dispersion Models

ss. 8(2) Negligible Sources

ss. 10(2) Operating Conditions

ss. 11(2) Refined Emission Rates

ss. 13(1) Meteorological Data

ss. 14(6) Area of Modelling Coverage

ss. 20(4) Speed-up Request

s. 32 Request for a Site-specific Standard Order

ss. 39(1)(a) Application for Technical Standard Registration (Industry Standard)

ss. 39(1)(b) Application for Technical Standard Registration (Equipment Standard)

Other (list all that have been issued) _____

Please attach the form(s) requesting the notice(s) and/or order(s) and any additional supporting information.

Has an s. 30 Upper Risk Threshold (Schedule 6) been exceeded?

Yes No

If yes, please include additional supporting information.

Is the facility located in a multi-tenant building?

Yes No

If yes, additional information may be requested.

Are all of the contaminants to which the application relates represented in the Ministry of the Environment and Climate Change publication titled "Summary of Standards and Guidelines to support Ontario Regulation 419: Air Pollution- Local Air Quality" or have they been screened out based on the publication titled " Jurisdictional Screening Level (JSL) List, A Screening Tool for Ontario Regulation 419: Air Pollution - Local Air Quality"?

Yes No

(If no, please attach Supporting Information for a Maximum Ground Level Concentration Acceptability Request for Compounds with no Ministry POI Limit - Supplement to Application for Approval, EPA S. 9).

✓ Completion Status (5.1.3 O. Reg. 419/05 Requirements)

✓ Completion Status (5.1 Air)

5.2 Noise Note** - If the application does not have noise emissions please proceed to Section 5.3

5.2.1 Noise Assessment [Information](#)

Has an Acoustic Assessment Report (AAR) been completed in relation to the proposed project/activity?

Yes No

If yes, please attach the Acoustic Assessment Report

Does the AAR show that applicable limits are met?

Yes No

If no, please attach the Acoustic Assessment Report including the Noise Abatement Action Plan

If no, is the application eligible for Primary or Secondary Noise Screening?

Yes No

Note that if the proposed activity is not eligible for either of the screenings, an AAR must be submitted.

If yes, is the proposed activity eligible for the Primary Noise Screening?

Yes No

If yes, is the actual separation distance between the facility and the nearest noise sensitive point of reception (POR) greater than the minimum required separation distance calculated from the Primary Noise Screening?

Yes No

If yes, please attach the Primary Noise Screening form and supporting documentation.

Note that if the Primary Noise Screening is not successful then the applicant may attempt to proceed with the Secondary Noise Screening.

If no, does the Secondary Noise Screening Form show that the applicable sound level limits are met?

Yes No

If yes, please attach the Secondary Noise Screening Form and supporting documentation.

Note that if meeting the applicable sound level limits cannot be demonstrated, then an AAR must be submitted.

✓ Completion Status (5.2.1 Noise Assessment)

5.2.2 Equipment Subject to Noise Review

Description	Number of Pieces of Equipment
<input type="checkbox"/> Arc Furnaces	
<input type="checkbox"/> Asphalt Plants	
<input type="checkbox"/> Blow-down Devices	
<input type="checkbox"/> Co-Generation Facilities	
<input type="checkbox"/> Crushing Operations	
<input type="checkbox"/> Flares	
<input type="checkbox"/> Gas Turbines	
<input type="checkbox"/> Pressure Blowers or Large Induced Draft Fans (flow rate > 47 m ³ /second or static pressure > 1.25 kilopascals)	
<input type="checkbox"/> Any other equipment not listed above that has not previously been reviewed by the Director in connection with an application for an Environmental Compliance Approval with respect to the facility	
<input type="checkbox"/> Any other equipment not listed above that is identical to equipment for which a noise assessment was previously reviewed by the Director in connection with an application for an Environmental Compliance Approval with respect to the facility	

✓ Completion Status (5.2.2 Equipment Subject to Noise Review)

✓ Completion Status (5.2 Noise)

5.3 Sewage Works [Information](#)

Note** - If the application does not contain Sewage Works please proceed to Section 5.4

5.3.1 Facility Type - Sewage Works

Select the type of facility that is the subject of the application (select all that apply). *

Sewage Treatment Plant (STP) Stormwater Management Facility

For the following, the applicant must complete and attach the relevant sections of the pipe data form:

Storm Sewers Ditches Combined Sewers
 Force mains Sanitary Sewers Pumping Station

Sewage Treatment Plant Details

Primary Secondary Tertiary
 Receives septage Constructed/Engineered Wetlands On-site system
 Lagoons (check all that apply below)

Septage Municipal Other (specify) _____

Facility Type

Municipal or private facility
 Category: New 1 2 3 4

Please indicate the maximum design capacity of the municipal or private sewage treatment plant:

≤ 4,500 m³/day > 4,500 m³/day

Facility for the treatment of leachate
 Category: New 1 2 3 4

Facility for the treatment of industrial process wastewater

Category: New 1 2 3 4

Facility for the disposal of non-contact cooling water

Subsurface disposal

Please indicate the design capacity of the subsurface disposal:

$\leq 15\text{m}^3/\text{day}$ $> 15\text{m}^3/\text{day}$ and $< 50\text{m}^3/\text{day}$ $> 50\text{m}^3/\text{day}$

Stormwater Management Facility Details

Category: * New 1 2 3 4

Pond Type *

Wet Pond Dry Pond Other (specify) * Oil & Grit Separator Unit

What is the drainage area (in hectares) associated with the proposed activity? * 39.86

Does the applicant own all, or part of the drainage area? *

Applicant owns all of the drainage area

Applicant owns part of the drainage area

Applicant does not own the drainage area

For the drainage area land that the applicant does not own, does the applicant have an agreement with the owner(s) of the drainage area?

Yes No

What is the predominant type of land use in the drainage area? *

Rural or Agricultural

Commercial or Industrial

Residential

Is a Hydrogeological Assessment required? *

Yes No

(If yes, please attach the hydrogeological assessment.)

Is a review of effluent criteria assessment for stormwater management, cooling water or soil remediation facilities required? *

Yes No

(If yes, please attach the final effluent criteria accepted by the Regional Office of the Ministry.)

Is a review of effluent criteria assessment for municipal or private sewage, industrial process wastewater or leachate treatment plant required? *

Yes No

(If yes, please attach the final effluent criteria accepted by the Regional Office of the Ministry.)

Note: The Hydrogeological Assessment, effluent criteria, and surface water assessment must be discussed and prepared with the Ministry's regional technical support section during a pre-application meeting(s) and consultation(s) with the Ministry. A proof of concurrence from technical support must be included as part of the ECA application package.

Completion Status (5.3.1 Facility Type - Sewage Works)

5.3.2 Servicing

The works will provide sewage servicing for (select all that apply): *

Residential

Residential Type *

Subdivision

Condominium

Institutional

Other (specify) _____

Is there a Municipal Responsibility Agreement in place? *

Yes No N/A

(If yes, please attach a copy of the Municipal Responsibility Agreement.)

Commercial

Commercial Type *

Hotel, Motel, Inn

Campground, Park

Rental Cabins

Resort

Shopping Malls

Restaurant

Highway Service Station/Gas Bars Other (specify) * To be determined

Industrial

Describe _____

Completion Status (5.3.2 Servicing)

5.3.3 Sewage Servicing for Waste Disposal/Landfill Sites

Does/Will the sewage treatment facility receive waste disposal/landfill site leachate? *

Yes No

If yes, please identify the site(s) below.

Name of Site Contributing Leachate	Environmental Compliance Approval Number	Volume of Leachate (m ³)
1.		

Completion Status (5.3.3 Sewage Servicing for Waste Disposal/Landfill Sites)

Completion Status (5.3 Sewage Works)

5.4 Waste Disposal Site

Note** - If the application is not for a waste disposal or processing site please proceed to Section 5.5

5.4.1 Facility Description - Waste Disposal Site (information on the nature of the proposed business or activity at this site)

Service Area _____

Total Area of Site (hectares) _____

Monitoring (select all that apply)

Groundwater

Surface Water

Landfill Gas

Leachate

None

Other (specify) _____

Type(s) of waste to be accepted at this site (select all that apply)

Subject:

Non-subject:

Hazardous Waste

Municipal (non-hazardous)

Liquid Industrial Waste

Other Liquid Waste

Municipal waste categories to be accepted at this site (select all that apply)

All Categories

Contaminated Soil

Domestic Sources

IC & I Sources

Source Separated Organics

Tires

Leaf and Yard Waste

Wood Waste

Blue Box Materials

Other (specify) _____

Other liquid waste categories to be accepted at this site (select all that apply)

- Processed Organics
 Hauled Sewage
 Waste from Food Processing/Preparation Operations
 Other (specify) _____

Hazardous Waste / Liquid Industrial Waste

| Class Code |
|------------|------------|------------|------------|------------|
| | | | | |

Completion Status (5.4.1 Facility Description - Waste Disposal Site)

5.4.2 Waste Transfer/Processing/Composting - Complete this information if waste transfer and/or processing and/or composting take(s) place at this facility

Waste Type to be Transferred or Processed

- Hazardous waste or liquid industrial waste

Design Capacity

- ≤ 100 tonnes per day
 > 100 tonnes per day

- Waste other than hazardous waste and liquid industrial waste

Design Capacity

- ≤ 100 tonnes per day
 > 100 tonnes per day

Change to Operations

- No Change Proposed
 Change does not require fundamental design review
 Change requires fundamental design review

Liquid Waste

Maximum Storage Capacity (m³)

Hazardous	Liquid Industrial	Other Liquid Waste
-----------	-------------------	--------------------

Maximum Residual for Final Disposal (m³)

Hazardous		Liquid Industrial Waste		Other Liquid Waste	
Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)

Hazardous	Non-Hazardous
-----------	---------------

Maximum Residual for Final Disposal (tonnes)

Hazardous		Non-hazardous	
Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-hazardous

Completion Status (5.4.2 Waste Transfer/Processing/Composting)

5.4.3 Thermal Treatment Facility - Complete this information if thermal treatment takes place at this facility

Waste Type for Thermal Treatment

Hazardous waste or liquid industrial waste

Design Capacity

≤ 100 tonnes per day > 100 tonnes per day

Waste other than hazardous waste and liquid industrial waste

Design Capacity

≤ 100 tonnes per day > 100 tonnes per day

Change to Operations

No Change Proposed

Change does not require fundamental design review

Change requires fundamental design review

Liquid Waste

Maximum Storage Capacity (m³)

Hazardous	Liquid Industrial	Other Liquid Waste

Maximum Residual for Final Disposal (m³)

Hazardous		Liquid Industrial Waste		Other Liquid Waste	
Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)

Hazardous	Non-Hazardous

Maximum Residual for Final Disposal (tonnes)

Hazardous		Non-hazardous	
Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-hazardous

Maximum Daily Feed Rate (tonnes/m³)

Hazardous Waste (tonnes)	Non-hazardous Waste (tonnes)	Liquid Industrial Waste (m ³)	Other Liquid Waste (m ³)

Completion Status (5.4.3 Thermal Treatment Facility)

5.4.4 Landfill Site - Complete this information if this facility operates as a landfill site

Waste Types to be accepted at the Landfill

Hazardous waste or liquid industrial waste

Design Capacity

≤ 40,000 m³ > 40,000 m³ ≤ 3 million m³ > 3 million m³

Waste is only uncontaminated tree stumps, leaves, branches, concrete and rocks

Design Capacity

≤ 40,000 m³ > 40,000 m³ ≤ 3 million m³ > 3 million m³

Waste other than hazardous waste and liquid industrial waste, other than uncontaminated tree stumps, leaves, branches, concrete and rocks.

Design Capacity

≤ 40,000 m³ > 40,000 m³ ≤ 3 million m³ > 3 million m³

Change to Operations

- No Change Proposed
- Change does not require fundamental design review or hydrogeological assessment
- Change requires fundamental design review or hydrogeological assessment

Note: The Hydrogeological Assessment, effluent criteria, and surface water assessment must be discussed and prepared with the Ministry’s regional technical support section during a pre-application meeting(s) and consultation(s) with the Ministry. A proof of concurrence from technical support must be included as part of the ECA application package.

Maximum Landfilling Capacity (m³)

Hazardous Waste	Non-hazardous Waste	Liquid Industrial Waste	Other Liquid Waste
-----------------	---------------------	-------------------------	--------------------

Maximum Amount of Waste to be Received

Hazardous Waste (tonnes)		Non-hazardous Waste (tonnes)		Liquid Industrial Waste (m³)		Other Liquid Waste (m³)	
Daily	Annually	Daily	Annually	Daily	Annually	Daily	Annually

Landfill Information

Area to be Landfilled (hectares)	Total Site Area including Buffer Area (hectares)
Estimated Date of Closure (yyyy/mm/dd)	Population Served

Control Types (select all that apply)

- Leachate Collected and Treated Off-site
- Leachate Collected and Treated On-site
- Landfill Gas Collected and Flared
- Landfill Gas Collected for Energy Generation
- Other (specify) _____

- Completion Status (5.4.4 Landfill Site)
- Completion Status (5.4 Waste Disposal Site)

5.5 Waste Management Systems (Except Mobile Waste Processing)

Note**- If the application is not for a waste management system please proceed to Section 5.7.

5.5.1 Fleet List (all vehicles and equipment to be used in the operation of the Waste Management System)

Year	Make	Model	Vehicle Identification Number (VIN)	License Plate Number	Province/State

Separate list attached?

Yes No

- Completion Status (5.5.1 Fleet List)

5.5.2 Vehicle Information

Are all the vehicles to be used owned by the applicant?

- Yes No

If no, please include additional information about ownership arrangements for each vehicle not owned by the applicant.

Has a minimum of \$1,000,000.00 liability insurance been obtained for all vehicles for which it is required?

- Yes No

Describe any additional insurances that are held (for example, environmental impairment liability insurance).

 Completion Status (5.5.2 Vehicle Information)

5.5.3 General Waste Management System

Type(s) of Waste to be Transported by the General Waste Management System (select all that apply)

Subject:

- Hazardous Waste
 Liquid Industrial Waste

Non-subject:

- Municipal (non-hazardous)
 Other Liquid Waste

Non-subject Categories to be Transported by the General Waste Management System (select all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Blue Box Materials | <input type="checkbox"/> Domestic Sources |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Non-Hazardous Solid Industrial |
| <input type="checkbox"/> Leaf/Yard Waste | <input type="checkbox"/> Wood Waste |
| <input type="checkbox"/> Spill Cleanup Material | <input type="checkbox"/> Contaminated Soil |
| <input type="checkbox"/> Tires | <input type="checkbox"/> Asbestos Waste in Bulk |
| <input type="checkbox"/> Waste Wash Water | <input type="checkbox"/> Grease Trap Waste |
| <input type="checkbox"/> Waste from Food Processing/ Preparation Operations | <input type="checkbox"/> Dewatered Catch Basin Clean-out Material |
| <input type="checkbox"/> Processed Organics (not for land application) | <input type="checkbox"/> Other (specify) _____ |

Subject Waste Categories to be Transported by the General Waste Management System

Hazardous Waste / Liquid Industrial Waste

| Class Code |
|------------|------------|------------|------------|------------|
| | | | | |

Separate list attached?

- Yes No

- All drivers are/will be trained in accordance with O. Reg. 347 and all pertinent environmental legislation.
 Each vehicle used to transport a specific subject waste class is suitable for that waste transportation in order to protect the health and safety of the public and the natural environment.

Note: For transporters of pathological waste and PCBs (waste classes 243 and 312) Operations Manual and Driver Training Manual must also be attached and Financial Assurance must be provided.

General Waste Management System - Disposal Site Information

What is the Final Destination of Waste to be Transported by the General Waste Management System? (select all that apply)

- A disposal site in Ontario approved by the Ministry of the Environment and Climate Change
 Disposal sites outside of Ontario approved by another regulatory agency

List the destination province(s)/state(s)

Province/State *	Province/State	Province/State	Province/State
Province/State	Province/State	Province/State	Province/State

✓ Completion Status (5.5.3 General Waste Management System)

5.5.4 Soil Conditioner Waste Management System (includes non-agricultural source material (NASM) that is waste and processed organic waste (biosolids) destined for land application only)

Has the applicant received recommendation from Biosolids Utilization Committee (BUC) for land application of processed organic waste (biosolids) or NASM?

Yes If yes, please provide a copy of the BUC recommendation.

No If no, please clarify _____

Spreading equipment (land application only)

Equipment Type	Make and Model	Description

Separate list attached?

Yes No

Method of system operation (land application only)

Estimated quantity to be handled on an annual basis (cubic metres/litres/tonnes)

Please describe the loading procedures:

Please describe the spreading methods:

Please describe the storage facilities (tanks, lagoons, etc.):

Soil Conditioner Waste Management System - Land Application Sites

What is the final destination of waste to be transported by the soil conditioner waste management system? (must include for land application only)

Non-agricultural land

Agricultural land

Both agricultural and non-agricultural land

✓ Completion Status (5.5.4 Soil Conditioner Waste Management System)

5.5.5 Hauled Sewage (Septage) Waste Management System

Type(s) of hauled sewage (septage) to be transported

Portable toilet waste

Septic tank waste

Holding tank waste

Other (specify) _____

Spreading equipment (land application only)

Equipment Type	Make and Model	Description

Separate list attached?

Yes No

Does this system include in-transit storage?

Yes No

If yes:

a) What is the duration of storage? Please specify (Maximum period of in-transit storage should not exceed more than two weeks):

b) Is the storage tank a prefabricated tank with the capacity < 100,000 L, designed and constructed in accordance with a Class 5 Sewage System under the Ontario Building Code or CAN/CSA B66-05?

Yes No If no, please provide a copy of the design of the storage tank signed and dated by a professional engineer.

Does this system include in-transit processing?

Yes No

If yes:

a) Location of in-transit processing:

In Vehicle In-storage Tank

b) Describe the method of in-transit processing:

Does this system use barge/boat to transport hauled sewage (septage)?

Yes No

If yes:

a) Has a minimum of \$1,000,000.00 liability insurance been obtained for the barge/boat for which it is required?

Yes No

b) Does the barge/boat have an engine of 10 horsepower (hp) or more, for which a commercial vessel license is required from Transport Canada?

Yes No If yes, please include a copy of the commercial vessel license.

Note: For in-transit storage or processing the applicant must include with the application the consent of the landowner, if the landowner is different than the applicant. A financial assurance estimate must be provided by applicants using in-transit storage or using in-transit processing where processing is conducted in the in-transit storage tanks.

Hauled Sewage (Septage) Waste Management System - Land Application Sites N/A

List the Environmental Compliance Approval Number(s) of all disposal site(s) approved by the Ministry of the Environment and Climate Change for land application of hauled sewage in association with this waste management system.

Instrument Type	Instrument Number	Approval or Application Date (yyyy/mm/dd)

✓ Completion Status (5.5.5 Hauled Sewage (Septage) Waste Management System)

✓ Completion Status (5.5 Waste Management Systems (Except Mobile Waste Processing))

5.6 Waste Management System - Mobile Waste Processing

Note**: If the application is not for the use and operation of mobile waste processing equipment, proceed to Section 5.7

5.6.1 Mobile Waste Management System Process and Equipment Description

Type(s) of Waste to be Processed (select all that apply)

Subject:

- Hazardous Waste
- Liquid Industrial Waste

Non-subject:

- Municipal (non-hazardous)
- Other Liquid Waste

Type of Waste to be Processed by the Unit(s)	Number of Units	Financial Assurance (per unit)	Financial Assurance Required
Non-hazardous Solid Waste		\$5,000	
Hazardous Waste		\$20,000	
Liquid Industrial Waste		\$20,000	
Other Liquid Waste		\$20,000	
Multiple Types of Waste from the Categories Above		\$20,000	

Total Financial Assurance

Municipal (non-hazardous) Waste Categories to be Processed (select all that apply)

- Contaminated Soil at Cleanup Site
- Wood Waste
- Construction and Demolition Waste
- Asbestos Waste
- Tires
- Domestic Waste
- Other (specify) _____

Other Liquid Waste Categories to be Processed (select all that apply)

- Hauled Sewage
- Waste from Food Processing/Preparation Operations
- Processed Organic
- Other (specify) _____

Hazardous / Liquid Industrial Waste Types to be Processed

| Class Code |
|------------|------------|------------|------------|------------|
| | | | | |

✓ Completion Status (5.6.1 Mobile Waste Management System Process and Equipment Description)

5.6.2 Equipment Information - Please attach a separate list if more space is required.

Equipment List

Unit No.	Unit Type	Process Description	Equipment Type	Make	Model	Serial Number	Equipment Capacity (including unit of measurement)

Separate list attached?

- Yes No

✓ Completion Status (5.6.2 Equipment Information)

✓ Completion Status (5.6 Waste Management System - Mobile Waste Processing)

5.7 Cleanup of Contaminated Sites

Note** - If the application is not for a cleanup of a contaminated site please proceed to Section 6.

Type of Cleanup

- In-situ
- Ex-situ
- Both

Contaminated media to be treated:

Groundwater

Surface water

Sediment

Soil

Waste Type

Subject:

Hazardous Waste

Liquid Industrial Waste

Non-subject:

Municipal (non-hazardous)

Other Liquid Waste

Type of discharge

Air

Groundwater

Storm or sanitary

Surface water

Noise

Completion Status (5.7 Cleanup of Contaminated Sites)

6. Supporting Documentation and Technical Requirements

6.1 General

This is a list of supporting information to this application and is subject to the FIPPA and EBR.

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Proof of legal name	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Enhanced EBR description	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Provincial Officer Notice	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Inspection Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Detailed project and process description	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Pre-application Consultation Record	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Legal Survey(s)	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Site Plan(s)	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Scaled area location plan(s) with geo-referencing points identified	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Documentation in support of EBR Exception	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Proof of Compliance with EAA Requirements	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Proof of Consultation/Notification	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Financial Assurance Estimate	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Name, address and consent of land/site owner for the installation and operation of the proposed activity or storage location of equipment or vehicle	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Name, address and phone number of the Operating Authority	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of NEPDA Permit	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy/Proof of Municipal Planning Approval (ORMCA, general)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Municipal Zoning Confirmation Letter	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Zoning map	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Conservation Authority Clearance	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Director's approval for Policy 2 Deviation	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Application Fee	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
A copy of this application has been sent to the Ministry Local District Office	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>



Completion Status (6.1 General)

6.2 Air

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Emission Summary and Dispersion Modelling (ESDM) Report prepared in accordance with s. 22 and of O. Reg. 419/05 (including signed checklist)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Electronic copy of the Dispersion Modelling input and output files prepared in accordance with s. 26 of O. Reg. 419/05	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Supporting Information for a Maximum Ground Level Concentration Acceptability Request for Compounds with no Ministry POI Limit - Supplement to Application for Approval, EPA S. 9	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copies of forms requesting O. Reg. 419/05 instruments and supporting documentation	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.2 Air)

6.3 Noise and Vibration

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Primary Noise Screening	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Secondary Noise Screening	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Acoustic Assessment Report including signed checklist (AAR)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Vibration Assessment Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Noise Abatement Action Plan	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.3 Noise and Vibration)

6.4 Sewage Works

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Signed Municipal Responsibility Agreement	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Detailed description of the proposed activities/works	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Notice of Completion for the Environmental Study Report (ESR)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design Brief	Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Refer to stormwater management report	<input type="checkbox"/>
Preliminary Engineering Report	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Final Plans	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Engineering Drawings and Specifications	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Sewage quantity and quality characteristics	Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Refer to stormwater management report	<input type="checkbox"/>
Stormwater Management Report	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Stormwater Management Plan	Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Refer to stormwater management report	<input type="checkbox"/>
Hydrogeological Assessment with proof of concurrence from the Ministry's Regional technical support section	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Environmental Impact Analysis	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Final effluent criteria accepted with proof of concurrence from the Ministry's Regional Technical Support Section	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Sewage Works Limited Operational Flexibility Requirements - Engineer's Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Sewage Works Limited Operational Flexibility Requirements - Declarations	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Pipe Design Data Form	Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.4 Sewage)

6.5 Waste Disposal Sites

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design and Operations Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Stormwater Management Report	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Hydrogeological Assessment with proof of concurrence from the Ministry's Regional technical support section	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Assessment of Physical and Water Use Conditions	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Waste Limited Operational Flexibility Requirements - Engineer's Report	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Waste Limited Operational Flexibility Requirements - Declarations	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of notification to adjacent landowners	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.5 Waste Disposal Sites)

6.6 Waste Management Systems

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Proof of vehicle and/or equipment ownerships	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Complete Fleet List (list of all vehicles, trailers and equipment used)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of the Liability Insurance for all vehicles for which insurance is required	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of BUC recommendation	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of the storage tank design	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Copy of commercial vehicle licence	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Description of the physical location where the vehicles transporting biomedical waste are being disinfected	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Drivers Training Manual (for PCB/ Biomedical Waste)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
A copy of the applicant's Operation Plan including detailed packaging and biomedical waste handling methods	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Contingency and Emergency Procedures Plan (for PCB/ Biomedical Waste/Hauled Sewage (Septage))	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

✓ Completion Status (6.6 Waste Management Systems)

6.7 Mobile Waste Processing N/A

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design and Operations Report - Mobile Waste Processing of General Waste	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Design and Operations Report - Mobile Waste Processing of Liquid Waste	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Completion Status (6.7 Mobile Waste Processing)

6.8 Cleanup of Contaminated Sites N/A

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Design Report for Cleanup of Contaminated Sites	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Other (please describe)	Optional	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Completion Status (6.8 Cleanup of Contaminated Sites)

6.9 Other Attachments N/A

Title	Reference	Confidential
		<input type="checkbox"/>

Is there an attachment of an additional list of attachments?

Yes No

If there is not enough space to list all of the attachments included in this application package, please include an additional listing of these attachments.

Completion Status (6.9 Other Attachments)

6.10 Confidentiality

Attachment	Required, Optional or N/A	Attai	If no, provide explanation, (include referenced attachment if more space is required for rationale)	Confidential
Explanation for confidentiality	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Completion Status (6.10 Confidentiality)

Please note: The collection of personal information in this application is necessary to administer the Ministry's approvals program, which is authorized pursuant to the *Environmental Protection Act* and the *Ontario Water Resources Act*. The personal information collected in this application will be used to administer the program, including for the purposes of the Ministry's compliance and enforcement activities under the aforementioned acts, and for the purposes of making information in respect of Environmental Compliance Approvals available to the public with the exception of payment information. Questions about the collection of the information can be directed to a Client Service Representative, Client Services and Permissions Branch, 135 St. Clair Avenue West, 1st Floor, Toronto ON M4V 1P5; Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001 or Fax 416-314-8452.

7. Authorization

7.1 Statement of the Applicant

I am authorized to prepare and submit this application and to make this certification. I have reviewed the complete application and I have made all inquiries that are necessary to declare to the best of my knowledge, information and belief:

- The information contained in this application is complete and accurate.
- The Technical Contact(s) identified in this application has/have been authorized to prepare certain technical material, and act on behalf of the applicant to discuss this application with the Ministry of the Environment and Climate Change and to provide additional information about this application to the Ministry on request.
- The information provided to the Technical Contact(s) in relation to this application is complete and accurate.

Name of Signing Authority (Please print) *

Steven Libfeld

Title *

CEO

Telephone Number

905-839-3500

ext.

Mobile Number

416-670-9116

Fax Number

Email Address

steve.l@mytribute.ca

Signature



Date (yyyy/mm/dd)

2020/11/27

✓ Completion Status (7.1 Statement of the Applicant)

7.2 Statement of the Municipality N/A

I, the undersigned hereby declare on behalf of the Municipality, that the Municipality has no objection to the construction of the works in the Municipality.

Name (Please print) *

Title *

.

Name of Municipality *

Township of Adjala-Tosorontio

Signature

Date (yyyy/mm/dd)

✓ Completion Status (7.2 Statement of the Municipality)

7.3 Statement of Technical Contacts

Technical Contact 1

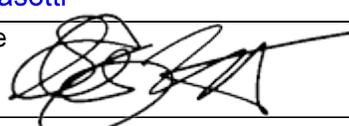
I have been authorized by the applicant to prepare the technical materials for the area(s) of responsibility identified in section 2.6 that are included in the application. I have reviewed those technical materials and I have made all inquiries that are necessary to declare to the best of my knowledge, information and belief:

- The technical materials contained in this application in respect of the area(s) of responsibility identified in section 2.6 are complete and accurate.
- I have the relevant education and experience necessary to provide this certification.

Name of Technical Contact (Please print) *

Geoff Masotti

Signature



Date (yyyy/mm/dd)

2020/11/27

✓ Completion Status (7.3 Statement of Technical Contacts)

8. Payment Information - Application for an Environmental Compliance Approval

Please Note:

1. If this form has been completed by hand, the fee calculations must be completed and attached separately. The supplemental fee calculations do not need to be included if this form has been completed electronically.
2. If this form has been completed electronically, the fees for this application have been calculated based on the information provided. The Ministry may require additional information during the review of the application that could impact the total fee required.
3. All fees should be paid in Canadian funds, payable to the *Minister of Finance*, except fees for *Transfer of Review*, which are payable to the local municipality.
4. Credit card payments are accepted for payments under \$10,000 only. **Never email credit card information.**
5. If payment is being made by certified cheque or money order, please staple the payment to this page.
6. The information collected in this section of the form is considered confidential and will only be used to process the application fee.
7. To protect credit card information, do not submit this page containing payment information via e-mail or any other electronic means if it includes credit card information. Credit card information should be submitted only by mail, facsimile, or hand-delivery. Applications containing payment information that are submitted via e-mail or any other electronic means will not be processed and will be destroyed.

Do not include this page in the copies of the application that are being provided to the Local Ministry District Office.

Amount Enclosed

Method of Payment *

Certified Cheque Money Order VISA MasterCard

Credit Card Information (if paying by VISA or MasterCard)

Name of Cardholder (Please print)

Card Number

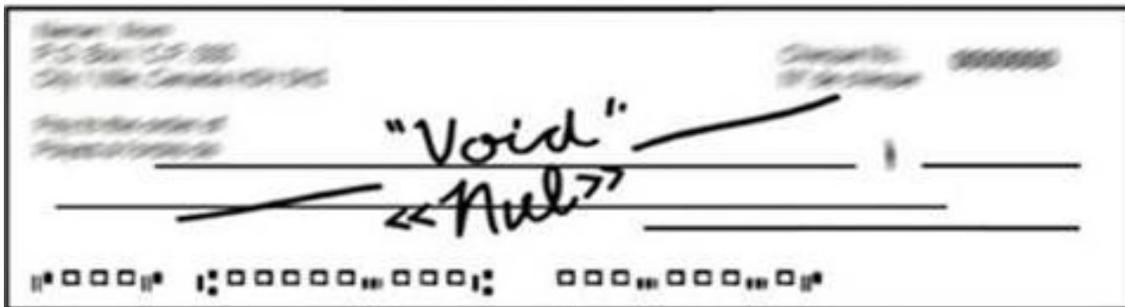
Expiry Date (mm/yy)

Card Holder's Signature

Date (yyyy/mm/dd)

✓ Completion Status (8 Payment Information)

If paying by certified cheque or money order, please attach it here.



Application Summary

For Office Use Only

Reference Number	Payment Received (\$)	Date (yyyy/mm/dd)	Initials

Applicant Name

Tribute Colgan 2 Limited

Project Name

Tribute Colgan 2

Project Description Executive Summary

The proposed development consists of 329 residential units and a retirement home complete with 170 beds. There will also be a commercial block within the development. A portion of the site will be allocated to area for roads, open space, and a stormwater management pond as well as a wastewater treatment plant. In total, the area of the lot is 39.86 ha.

Quality and quantity control of internal storm runoff will be provided such that the post development flows do not exceed pre development conditions for all storms up to and including 100 year events, and MECP Enhanced Protection quality control is provided. Stormwater quantity and quality criteria will be met via a storm water management pond on the west side of the site. Groundwater will also be collected in the storm sewer system. The groundwater flows will bypass the pond and be treated with an Oil & Grit Separator prior to discharging to the site outlet.

To provide sanitary servicing, the site will transport all sanitary waste north to a via a gravity sewer to an on-site wastewater treatment plant (WWTP). The site will also transport the sewage from a neighbouring development to the south known as Tribute Colgan 1, which is also owned by the applicant.

This WWTP and adjacent development, will be subject to separate ECA Applications.

Supplemental Application Information

Enclosed for your review and approval is an application for the proposed stormwater management pond and oil & grit separator at the above noted development. This application package includes the following:

- 1) A completed and signed (Applicant and Municipality) application form including "Pipe Data Form - Supplemental to Application for Approval for Sewage Works";
- 2) Two bound sets of drawings;
- 3) Articles of Incorporation for the Applicant;
- 4) Servicing and Stormwater Management Implementation Report; and,
- 5) An application fee in the amount of \$2200.

A complete package has also been submitted to the district office in Barrie.

Should you have any questions or concerns regarding the information provided, please do not hesitate to contact our office.

Application Status

Section	Compl			
1. Application Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
2. Project Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
3. Regulatory Requirements	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
4. Site Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5. Facility Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6. Supporting Documentation	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
7. Payment Information	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
8. Authorization	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Fee Summary

Activity	Amount (\$)
Administrative Processing	\$200.00
Review of EPA s. 9 activities	\$0.00
Review of EPA s. 27 activities	\$0.00
Review of OWRA s. 53 activities	\$2,000.00
Total Fee	\$2,200.00

The Ministry may request additional fees upon review of this application.

If this form is submitted in print version only and the smart calculation feature is not used, please attach the fee calculation separately.

E-mail from Greenland
Stormwater Management Facilities, ECA application to MoECP
recommending endorsement
Colgan 1 & 2, Tribute Development

From: Josh Maitland <jmaitland@grnland.com>
Sent: June 29, 2021 11:18 AM
To: John Thompson <jthompson@adjtos.ca>
Subject: Recommendation for Colgan 1 and Colgan 2 Stormwater Management Facility
ECA Applications

Good morning John,

Greenland Consulting Engineers (Greenland) has reviewed all relevant technical information associated with the Stormwater Management Facility (SWMF) ECA Applications for Colgan 1 and Colgan 2

Greenland has found the materials provided (as of the date of this correspondence) to be in conformance with the Township of Adjala-Tosorontio (Township) and other relevant Standards and appropriate for submission at this time.

We note that the Nottawasaga Valley Conservation Authority (NVCA) has also provided correspondence (which will form part of the applications) stating that they are in agreement with the design approach for the purposes of submission to MECP based on their review completed to-date

Please consider this email as Greenland's recommendation that the Township proceed with endorsement and signature of the SWMF ECA Applications for submission by the proponent (Tribute Homes) to the MECP.

Sincerely,

Josh Maitland, P.Eng.
Project Manager