

Clean water Act Section 59 IV Enquiry Referral Form

1.0 General Information

| | |
|---|--|
| Name (Owner and Tenant or Contractor): | |
| Property Address: | Date: |
| | Fax: |
| Phone: | Roll #: |
| Cell: | Lot/Con: |
| Email: | Municipality: |
| Mailing Address (if different from above): | Drinking Water System: |
| | Vulnerable Area (please check www.trentsourceprotection.on.ca or contact Lower Trent Conservation or municipality if unsure): |

2.0 Application Type (check all that apply):

| | |
|-------------------------------------|-------------------------|
| <input checked="" type="checkbox"/> | Land Use |
| <input type="checkbox"/> | Building Permit |
| <input type="checkbox"/> | Minor Variance |
| <input type="checkbox"/> | Change of Ownership |
| <input type="checkbox"/> | Zoning Change |
| <input type="checkbox"/> | Severance/Subdivision |
| <input type="checkbox"/> | Land Use Change |
| <input type="checkbox"/> | Other (Please specify): |

3.0 Land Use:

| <input checked="" type="checkbox"/> | Present Land Use | <input checked="" type="checkbox"/> | Proposed Land Use |
|-------------------------------------|-------------------------|-------------------------------------|-------------------------|
| <input type="checkbox"/> | Residential | <input type="checkbox"/> | Residential |
| <input type="checkbox"/> | Agricultural | <input type="checkbox"/> | Agricultural |
| <input type="checkbox"/> | Commercial | <input type="checkbox"/> | Commercial |
| <input type="checkbox"/> | Institutional | <input type="checkbox"/> | Institutional |
| <input type="checkbox"/> | Industrial | <input type="checkbox"/> | Industrial |
| <input type="checkbox"/> | Other (Please specify): | <input type="checkbox"/> | Other (Please specify): |

4.0 Proposed Activity:

(Please provide description of activity)

Fax or email to Lower Trent Conservation (613) 394-5226 or information@ltc.on.ca