TOWNSHIP OF ULMUR

Application for Fill Permit

Under By-law 4-2015

PERMIT	NUMBER:

THE CORPORATION OF THE TOWNSHIP OF MULMUR

758070 2 nd Line East Mulmur, ON L9V 0G8	SUMMARY OF FEES			
Telephone: 705-466-3341 Fax: 705-466-2922	Small Scale:			
	Fee: \$500.00			
	Deposit: as estimated by staff			
DATE RECEIVED:	Large Scale:			
	Fee \$1000.00			
	Deposit: as estimated by staff			
Property Roll Number:	Submission of the Application			
	☐ One application form, signed			
Face Baselined	☐ Application Fee☐ 1 copy of the completed application			
Fees Received:				
	form			
	☐ 1 copy of the survey			
Receipt Number	☐ Site Characteristics Plan			
	☐ Estimate of proposed fill			
	☐ Grading Plan (existing & proposed)			
Completeness of the Application	☐ Erosion control plan			
	☐ Site restoration plan			
The information in this form must be	☐ Traffic Plan (hauling, entrance			
provided by the applicant with the	details, location, internal stacking			
appropriate fee. If the information and fee	area & mud mat)			
are not provided, the application will be	☐ Hauling schedule and duration			
returned or refused for further consideration	□ Pre-consultation with Road Authority□ Signage drawing			
until the information and fee have been				
provided.	□ Development Plan			
The application form also sets out other	☐ Agent Authorization (if required)			
information that will assist the Township and	☐ Pre-consultation with NVCA			
others in their planning evaluation of the	☐ Pre-consultation with NEC			
application. To ensure the quickest and most	☐ Soil analysis			
complete review, this information should be	☐ Report prepared by Qualified Person			
submitted at the time of application. In the	☐ Copies of applicable permits (NVCA,			
absence of this information, it may not be	NEC, Dufferin County, Planning,			
possible to do a complete review within the	Entrance, Tree cutting by-law) and			
legislated time frame for making a decision.	copies of any materials provided			
As a result, the application may be refused.	from any agency.			
	☐ Agricultural Justification Reports (if			
	applicable)			
	☐ List of impacted landowners (haul			
	route & 500 m radius)			
	☐ Estimate of Security Deposit and			
	Road Maintenance Security and			

Fees and Levies

SITE LOCATION						
Municipal Address:						
Lot: Con:		Plan:		Part:		
OWNER INFORMATION						
Name:			Daytime Phone #:			
Address:			Evening Phone #:			
City:	Cell #:		Cell #:			
Postal Code:	Email:					
APPLICANT INFORMATION (if different from Owner)						
Name:			Daytime Phone #:			
Company:			Evening Phone #:			
Address:			Fax #:			
City:			Cell #:			
Postal Code:	Email:					
PURPOSE						
Application is to: ☐ Place or Dur	np Fill Alte	er Gra	de of Land □ R	lemove Fill/Top Soil		
Volume of Fill Requested:						
Amount of Fill per day:						
What days of the week would hauling occur: What hours of the day would hauling occur:						
Start Date:			End Date:			
Description of proposed work:						
Source Location:						
OPERATOR INFORMATION – Person who will be on-site for the full duration of the Fill Operation, responsible to ensure compliance with the Fill By-Law and Permit						
Name:			Daytime Phone #:			
Company:			Evening Phone #:			
Legal Name:						
Address:			Fax #:			
City:			Cell #:			
Postal Code:	Email:					

THIS PAGE TO BE ON REVERSE SIDE OF PERMIT PLACARD

APPLICANT'S CERTIFICATION I am the Owner of this Site, or I have provided a letter specifically authorizing the Applicant to apply for a Fill Permit. I have read Fill By-Law 4-2015 and agree to comply with it. The information in this application and the supporting documents are complete and accurate. I authorize the Township to enter the site at any reasonable time to determine compliance with the Fill By-Law. Only fill from the above operator and above source location is to be received at this site. Owner Authorized Signature: Date: Date: Date: Date: