

Site Alteration Permit Application



Municipal Works Department
4310 Queen Street, P.O. Box 1023
Niagara Falls, ON L2E 6X5
Tel: 905-356-7521
Fax: 289-296-0048

www.niagarafalls.ca

Permit No. _____

<p>Applicant</p> <p>Owner: _____</p> <p>Contact: _____</p> <p>Mailing Address: _____</p> <p>Company: _____</p> <p>Business Phone: _____</p> <p>Fax: _____</p> <p>Cell: _____</p> <p>E-Mail: _____</p>	<p>Work & Location</p> <p>Purpose of Work: _____</p> <p>Location(s): _____</p> <p>_____</p> <p>Anticipated Start Date: _____</p> <p>Anticipated Completion Date: _____</p> <p>Anticipated Working Hours: _____</p> <p>Road Closure Required: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><i>If Yes, a Road Occupancy Permit is required.</i></p>
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<p>Details</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">Yes</th> <th style="width: 10%; text-align: center;">No</th> </tr> </thead> <tbody> <tr> <td>Is there a registered flood or fill line on the property?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Is there an environmentally sensitive area (ESA) on this property?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Has the property ever been used for industrial, commercial, or institutional purposes?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Is there any environmental contamination on the property?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Will elevations be altered at the property lines?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Is a Regional Tree-Cutting Permit required?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Are any of the lands under Niagara Peninsula Conservation Authority Jurisdiction?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		Yes	No	Is there a registered flood or fill line on the property?	<input type="checkbox"/>	<input type="checkbox"/>	Is there an environmentally sensitive area (ESA) on this property?	<input type="checkbox"/>	<input type="checkbox"/>	Has the property ever been used for industrial, commercial, or institutional purposes?	<input type="checkbox"/>	<input type="checkbox"/>	Is there any environmental contamination on the property?	<input type="checkbox"/>	<input type="checkbox"/>	Will elevations be altered at the property lines?	<input type="checkbox"/>	<input type="checkbox"/>	Is a Regional Tree-Cutting Permit required?	<input type="checkbox"/>	<input type="checkbox"/>	Are any of the lands under Niagara Peninsula Conservation Authority Jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>	<p>Proposed Truck Route</p> <p>Quantity of Material _____ tonnes</p> <p>Number of Truckloads _____ per day</p> <p>Dust/Debris Control Measures _____ (if required)</p> <p>Diagram (Sketch of Truck Route)</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
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I/We the undersigned have read and understood the information provided and agree to abide by conditions of the permit. All in accordance with By-law No. 2002-064, 2002-065 and 2007-260
It is the applicant's responsibility to obtain approval from all applicable external agencies.

Owner Signature: _____ **Date:** _____

<i>This section to be completed by City of Niagara Falls staff</i>	
<p>Administration Fee: \$ _____</p> <p>Security Deposit: \$ _____</p>	<p>Received By: _____</p>

Conditions For Issuance _____

City Authorization: _____

Supervisor of Construction Services

The personal information collected on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56, s. 28 and will be used for administrative purposes. Questions about this collection should be addressed to Supervisor of Construction Services, City Hall 4310 Queen Street, Niagara Falls, Ontario, L2E 6X5 or call 905-356-7521.