

# Application for a Certificate of Approval for a Waste Disposal Site

Ce formulaire est disponible en français

## **General Information and Instructions**

## General:

Information requested in this form is collected under the authority of the *Environmental Protection Act*, R.S.O. 1990 (EPA) and the *Environmental Bill of Rights*, C. 28, Statutes of Ontario, 1993, (EBR) and will be used to evaluate applications for approval of waste disposal sites under Section 27, EPA. Questions about this collection of information should be directed to: Information Unit Supervisor, Environmental Assessment and Approvals Branch, 2 St. Clair Ave. W, Floor 12A, Toronto ON M4V 1L5. Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

## Instructions:

- Applicants are responsible for ensuring that they complete the most recent application form. When completing this form, please refer to the following guidance material: the "Guide for Applying for Certificate of Approval of Waste Disposal Sites, Section 27, 30, 31 and 32, EPA," (referred to as the Guide) and "Guide Application Cost for Waste Management, S. 27, EPA". Application forms and supporting documentation are available from the Environmental Assessment and Approvals Branch toll free at 1-800-461-6290 (locally at 416-314-8001), from your local District Office of the Ministry of the Environment, and in the "Publications" section of the Ministry of the Environment website at <a href="http://www.ene.gov.on.ca/envision/gp/index.htm#disposal">http://www.ene.gov.on.ca/envision/gp/index.htm#disposal</a>.
- Questions regarding completion and submission of this application should be directed to the Environmental Assessment and Approvals Branch, 2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5, telephone number 1-800-461-6290 or (416) 314-8001, or to your local District Office of the Ministry of the Environment.
- 3. A complete application consists of:
  - 1) a completed and signed application form;
  - 2) all required supporting information identified in this form, the guidance material, and
  - 3) a certified cheque, money order or credit card payment, in Canadian funds, made payable to the *Ontario Minister of Finance* for the applicable application fee.

This form must be completed with respect to all requirements identified in the guidance material in order for it to be considered an application for approval.

**INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT.** The Ministry may require additional information during the technical review of any application initially accepted as complete.

4. The original application, along with the supporting information and the application fee, must be sent to:

# The Ministry of the Environment,

Director, Environmental Assessment and Approvals Branch, Section 27 2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5

A copy of the application and the supporting information must be sent to the local Ministry District Office which has jurisdiction over the area where the facilities are located. To locate the appropriate local Ministry District Office, please visit the Ministry of the Environment Internet site at: <a href="http://www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist">www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist</a>.

A copy of the application and the supporting information must also be sent to the local municipality (unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality). Copies shall be provided to both the upper and lower tier municipality if applicable to the area where this facility is located.

A cover letter addressed to the Director of Environmental Assessment and Approvals Branch should accompany both submissions and indicate that a copy of the complete submission has been sent to the local District Office and local municipality(s).

- 5. Information contained in this application is not considered confidential and will be made available to the public upon request. Information submitted as supporting information may be claimed as confidential but will be subject to the *Freedom of Information and Protection of Privacy Act* (FOIPPA) and *EBR*. If you do not claim confidentiality at the time of submitting the information, the Ministry may make the information available to the public without further notice to you.
- 6. The electronic version of this form incorporates several features to assist you with completing your application. The form will calculate certain values based on the information you enter and will assist you in ensuring that all required information is included with your application. This form has been save-enabled; you can save a copy of this form that includes any information you have entered. You are encouraged to use the electronic version of this form, available on the Ministry of the Environment website at: <a href="http://www.ene.gov.on.ca/envision/gp/4181e.pdf">http://www.ene.gov.on.ca/envision/gp/4181e.pdf</a>.



# Application for a Provisional Certificate of Approval for a Waste Disposal Site

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 For Office Use Only

 Reference Number
 Payment Received
 Date (y/m/d)
 Initials

 \$
 \$
 \$
 \$
 \$

# **Application Summary**

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

Project Name (Project identifier to be used as a reference in correspondence)

Project Description Summary (If EBR is applicable, this summary will be used in the EBR posting notice)

| Required Information               | Completed (yes or no) |
|------------------------------------|-----------------------|
| Project Name & Description         |                       |
| Section 1: Applicant Information   |                       |
| Section 2: Project Information     |                       |
| Section 3: Site Information        |                       |
| Section 4: Facility Information    |                       |
| Section 5: Regulatory Requirements |                       |
| Section 6: Supporting Information  |                       |
| Payment Information Section        |                       |
| Application Status:                |                       |

## Cost Summary:

| Administrative processing (required for most applications) | \$<br>Review of Application | \$ |
|--|-----------------------------|----|
| Hearing (if mandatory or necessary)                        | \$<br>TOTAL COST            | \$ |

# **Section 1: Applicant Information**

## 1.1 Applicant Information (Owner of works/facility)

| Business Name (the name under which the entity is operating or trading - also referred         Applicant Type:       Nort         Corporation       Federal Government         Individual       Municipal Government | th American Industry Classification System (NAICS) Code |
|--|---|
| Corporation Federal Government   | th American Industry Classification System (NAICS) Code |
|  |   |
| Individual Municipal Government  |   |
|  |   |
| Partnership Provincial Government  |   |
| Sole Proprietor Other (describe):  |   |

## 1.2 Applicant Physical Address

| Civic Address- Street information (includes street number, name, type and direction) |  |                     |                |                   |                   |          | er (i.e. apartment number) |
|--|--|---------------------|----------------|-------------------|-------------------|----------|----------------------------|
| Survey Address<br>(Not required if Street Infor                                      | mation is provided)                          | Lot                 |                | Conc.             | Part              |          | Reference Plan             |
| Municipality /Unorganize   | d Township Count                             | y/District          | Province/State |                   | untry             | P        | ostal Code                 |
| Telephone Number (inc.   | lude area code & ext.)                       | Fax Number (include | area code)     | Mobile Number (in | nclude area code) | E-mail A | ddress                     |
|  | ext.   |                     |                |                   |                   |          |                            |
|  | Geo Reference (southwest corner of property) |                     |                |                   |                   |          |                            |
| Map Datum  | Zone   | Accuracy Esti       | mate Geo       | Referencing Metho | d UTM Easting     |          | UTM Northing               |

## 1.3 Applicant Mailing Address

| Same as Applicant Physical Address?          | Yes          | No (If no, please provi         | de site address informa | tion below)    |  |             |
|--|--------------|---------------------------------|-------------------------|----------------|--|-------------|
| Civic Address - Street information (civic nu | Unit Ider    | ntifier (i.e. apartment number) |                         |                |  |             |
|  |              |                                 |                         |                |  |             |
| Delivery Designator                          |              | Delivery Identifier             |                         | Postal Station |  |             |
|  |              |                                 |                         |                |  |             |
| Municipality                                 | Province/Sta | te                              | Country                 |                |  | Postal Code |
|  |              |                                 |                         |                |  |             |

## 1.4 Statement of Applicant

| I, the un | ndersigned hereby declare that, to the best of my knowledge:  |
|-----------|---|
| •         | The information contained herein and the information submitted in support of this application is complete and accurate in every way and I am aware of the penalties against providing false information as per s. 184(2) of the Environmental Protection Act.   |
| •         | The Project Technical Information Contact identified in this form is authorized to act on my behalf for the purpose of obtaining approval under Section 27 of the EPA for the waste disposal site identified herein.  |
| •         | I have used the most recent application form, as obtained from the Ministry of the Environment Internet site at <a href="http://www.ene.gov.on.ca/en/publications/forms/index.php#PartWaste">http://www.ene.gov.on.ca/en/publications/forms/index.php#PartWaste</a> or the Environmental Assessment and Approvals Branch at 1-800-461-6290. |

| Name of Signing Authority (please print)                   |                           | Title    |                |
|--|---------------------------|----------|----------------|
| Telephone Number (including area code & extension)<br>ext. | Fax Number (including are | ea code) | E-mail Address |
| Mobile Number (including area code)                        | Signature                 |          | Date (y/m/d)   |

# Section 2: Project Information

| 2.1 Application Type   |                                       |   |  |  |
|--|---------------------------------------|---|--|--|
| Type of Application:   |                                       |   |  |  |
| New Certificate of Approval New Comprehensive Certificat   | te of Approval                        |   |  |  |
| Amendment to Current Certificate of Approval Convert Existing Approval to C  | Comprehensive Certificate of Approval |   |  |  |
| Administrative Amendment to Current Certificate of Approval Revocation   |                                       |   |  |  |
| Compliance with Conditions of the Existing Approval  |                                       |   |  |  |
| Is this a submission for Preliminary Review of your application?   |                                       |   |  |  |
| Yes No If yes, the application must be complete and finalized before you submit it for Preliminary   | / Review.                             |   |  |  |
| Application Initiated by:  |                                       |   |  |  |
| Proponent Environmental Assessment Provincial Officer Order (attach copy) C<br>and Approvals Branch  | Dther (specify):                      |   |  |  |
| Current Certificate of Approval  |                                       |   |  |  |
| Certificate of Approval Number Certificate of Approval Date of Issue (yyyy/mm/dd)  |                                       |   |  |  |
| Project Schedule   |                                       |   |  |  |
| Estimated date for start of construction/installation (yyyy/mm/dd) Estimated date for start of oper  | ration (yyyy/mm/dd)                   |   |  |  |
| Comprehensive Certificate of Approval – Eligibility Screening Questionnaire  |                                       |   |  |  |
| <ol> <li>Does the waste disposal site that is the subject of this application meet all of the requirements for eligibility<br/>the most current version of the Ministry document titled "Guide for Applying for Approval of Waste Disposa<br/>on the Ministry website at <u>www.ene.gov.on.ca</u>?</li> </ol>                            |                                       | 0 |  |  |
| Does the application being submitted include all of the information that is required for a comprehensive certificate of approval as specified in the most current version of the Ministry document titled, "Guide for Applying for Approval of Yes No Waste Disposal Sites" found on the Ministry website at: <u>www.ene.gov.on.ca</u> ? |                                       |   |  |  |
| <ul> <li>Have both the Project Information Technical Contact for this application and the preparer of the Engineer's Report Yes No completed the mandatory Waste Comprehensive Certificate of Approval orientation session?</li> </ul>   |                                       |   |  |  |
| 4. Does the waste disposal site for which this proposal is made have any outstanding environmental issues of   | or complaints? Yes No                 | 0 |  |  |
| Screening Result:  |                                       |   |  |  |

## 2.2 Project Technical Information Contact

| Name of Project Technical Information Conta   | act                                | Company                | Company                                 |                |  |  |
|---|------------------------------------|------------------------|---|----------------|--|--|
|   |                                    |                        |   |                |  |  |
| Telephone Number (include area code & ext.)   | Fax Number (include area cod       | e) Mobile Number (incl | ude area code)                          | E-mail Address |  |  |
| ext.  |                                    |                        |   |                |  |  |
| Address Information:  |                                    |                        |   |                |  |  |
| Same as Applicant Mailing Address? Yes No (If no, please provide technical information contact address information below) |                                    |                        |   |                |  |  |
| Civic Address - Street information (civic numb  | ling street number, name, type and | d direction)           | Unit Identifier (i.e. apartment number) |                |  |  |
|   |                                    |                        |   |                |  |  |
| Delivery Designator   | Delivery Identifie                 | r                      | Postal Station                          |                |  |  |
|   |                                    |                        |   |                |  |  |
| Municipality /Unorganized Township  | Province/State                     | Country                |   | Postal Code    |  |  |
|   |                                    |                        |   |                |  |  |

# Section 3: Site Information

## 3.1 Site Address - (location where activity/works applied for is to take place)

| Same as Applicant Physical Address? Yes No (If no, please provide site address information below)                            |  |                                   |                        |                |   |                |  |  |  |
|--|--|-----------------------------------|------------------------|----------------|---|----------------|--|--|--|
| Civic Address- Street information (includes street number, name, type and direction) Unit Identifier (i.e. apartment number) |  |                                   |                        |                |   |                |  |  |  |
|  |  |                                   |                        |                |   |                |  |  |  |
| Survey Address   |  | Lot                               | Conc.                  | Part Reference |   | Reference Plan |  |  |  |
| (Legal description of the site)  |  |                                   |                        |                |   |                |  |  |  |
| Municipality /Unorganized Township   |  | County/District Po                |                        | Postal Code    |   |                |  |  |  |
|  |  |                                   |                        |                |   |                |  |  |  |
| Non Address Information  | า (includes any additional infe              | ormation to clarify applicants' p | physical location)     |                |   |                |  |  |  |
|  |  |                                   |                        |                |   |                |  |  |  |
|  | Geo Reference (southwest corner of property) |                                   |                        |                |   |                |  |  |  |
| Map Datum  | Zone   | Accuracy Estimate                 | Geo Referencing Method | UTM Eastin     | g | UTM Northing   |  |  |  |
|  |  |                                   |                        |                |   |                |  |  |  |

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

| Site Name  |                |           | MOE District Office   |  |  |  |  |
|--|----------------|-----------|---|--|--|--|--|
|  |                |           |   |  |  |  |  |
| Is the site (  | property) that | it is the | subject of this application owned by the Applicant?   |  |  |  |  |
|  | Yes            | No        | If no, please attach the owner's name, address and a signed letter granting consent for the installation and operation of the facilitie |  |  |  |  |
| Is the Appli   | icant the ope  | rating a  | authority of the site that is the subject of this application?  |  |  |  |  |
|  | Yes            | No        | If no, please attach the operating authority name, address and phone number   |  |  |  |  |
| Is the Site  | located in an  | area o    | f development control as defined by the Niagara Escarpment Planning & Development Act (NEPDA)?  |  |  |  |  |
|  | Yes            | No        | If yes, please attach a copy of the NEPDA permit for proposed activity/work   |  |  |  |  |
| Is the Site located on the Oak Ridges Moraine Conservation Area as defined by the Oak Ridges Moraine Conservation Plan (ORMCP), a regulation made under the Oak Ridges Moraine Conservation Act (ORMCA)? |                |           |   |  |  |  |  |
|  | Yes            | No        | If yes, please attach proof of Municipal planning approval for the proposed activity/work   |  |  |  |  |

## 3.3 Site Zoning and Classification

| Present   | Land Use     |                   | Present Official Plan D    | esignation                | Present Zoning Category                |  |
|---|--------------|-------------------|----------------------------|---------------------------|--|--|
|   |              |                   |                            |                           |  |  |
| Adjacent Land Use (select all that apply)                             |              |                   |                            |                           |  |  |
| 1   | Industrial   | Commercial        | Residential                |                           |  |  |
|   | Agricultural | Recreational      | Other(specify):            |                           |  |  |
| Does the site currently have proper zoning for the proposed facility? |              |                   | e proposed facility?       | Has this facility been id | entified as part of the Official Plan? |  |
|   | Yes          | No                |                            | Yes                       | No                                     |  |
| Has the Applicant received municipal zoning confirmation?             |              |                   |                            |                           |  |  |
|   | Yes          | No If yes, please | attach correspondence from | the municipality          |  |  |

# Section 4: Facility Information

|  | - ·  | formation on the natu                           |                                     |              | or activ  | rity at this site)     |                                       |                      |                    |
|--|--|---|-------------------------------------|--------------|-----------|------------------------|---------------------------------------|----------------------|--------------------|
| Landfill   | Fype of Facility / Operation (select all that apply & complete all appropriate sections)         Landfill       Transfer       Processing       Thermal Treatment Facility       Household Hazardous Waste |   |                                     |              |           |                        |                                       |                      |                    |
| Closed L   |  | Composting                                      | Jeessing                            |              | lennai    | Treatment raci         | ity II                                |                      |                    |
| Days and Hours   |  |   | anuad by this Cita                  | (#)          | ) on vice | 4.000                  | Та                                    | tal Araa of Sita (ha | -()                |
| Days and Hours   | or Operation   |   | Served by this Site                 | (#) 3        | Service   | Area                   |                                       | tal Area of Site (he | ctares)            |
| Monitoring (selec  | ct all that apply)   |   |                                     |              |           |                        |                                       |                      |                    |
| Groundv  | vater S  | Surface Water                                   | Landfill Gas                        | Lea          | chate     | None                   | Other(spec                            | ify):                |                    |
| Type(s) of Waste to be Accepted at this Site (select all that apply)<br>Municipal Waste Hazardous Waste Liquid Industrial Waste Other Liquid Waste |  |   |                                     |              |           |                        |                                       |                      |                    |
| Municipal Waste  | Municipal Waste Categories to be Accepted at this Site (select all that apply)   |   |                                     |              |           |                        |                                       |                      |                    |
| All Cate   | -  | Domestic Sources                                | IC&I sou                            |              | Sou       | rce Separated (        | Droanics Ti                           | res Leaf             | & Yard Waste       |
|  | nated Soil   | Wood Waste                                      |                                     | Materials    |           | Other <i>(specif</i> y | -                                     |                      |                    |
| Other Liquid Ma  | ata Catagoriaa   | to be Accepted at thi                           | o Sito (aplant all the              | topphi)      |           |                        | ,                                     |                      |                    |
| •  | ed Organics  | •   | ood Processing /                    |              | lauled    | Sewage                 | Other(specify):                       |                      |                    |
| Hazardous / Liq  | uid Industrial W   | aste Types to be Acc                            | epted at this Site                  |              |           |                        |                                       |                      |                    |
| Class Code   | Class Code   |   | Class Code                          | Class Co     | ode       | Class Code             | Class Code                            | Class Code           | Class Code         |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
| <b>4.2 Other Approvals for Facility</b> – Please attach a separate list if more space is required Separate list attached? Yes No                   |  |   |                                     |              |           |                        |                                       |                      |                    |
|  |  | provals/permits applie<br>gement, etc.) and the |                                     |              |           |                        |                                       | he Environmental I   | Protection Act     |
| Approval Type  | Approva  | al Number                                       | Approval or App<br>Date (yyyy/mm/do |              | Approva   | Туре                   | Approval Number                       |                      | val or Application |
|  |  |   |                                     | ,            |           |                        |                                       |                      | ,                  |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
| 4.3 Waste Tra  | nsfer and/or   | Processing – Con                                | nlete this informa                  | tion if wast | e trans   | fer and/or proce       | ssing take place at                   | this facility        |                    |
|  |  | e Transferred or Pro                            |                                     |              | o tranc   |                        | Design Capac                          |                      |                    |
| Hazar  | dous waste or  | liquid industrial waste                         |                                     |              | ≤ 1(      | 0 tonnes per da        | iy a                                  | > 100 tonnes per d   | ау                 |
| Waste  | e other than haz   | zardous waste and liq                           | uid industrial was                  | te           | ≤ 1(      | 0 tonnes per da        | iy s                                  | > 100 tonnes per d   | ау                 |
| Liquid Waste   |  |   |                                     |              |           |                        |                                       |                      |                    |
|  | mum Storage C<br>_iquid Industrial   |   | te Ha                               | zardous      | N         |                        | al for Final Disposa<br>id Industrial |                      | uid Waste          |
|  |  |   | Daily                               |              | ually     | Daily                  | Annually                              | Daily                | Annually           |
|  |  |   |                                     |              |           |                        |                                       |                      |                    |
| Solid Waste  |  |   |                                     |              |           |                        |                                       |                      |                    |
| Maximum Storage Capacity (tonnes)       Maximum Residual for Final Disposal (tonnes)         Hazardous       Non-Hazardous                         |  |   |                                     |              |           |                        |                                       |                      |                    |
|  | Daily Annually Daily Annually  |   |                                     |              |           |                        |                                       |                      |                    |
| Maximum Amount of Waste to be Received Daily   |  |   |                                     |              |           |                        |                                       |                      |                    |
| Liquid (m <sup>3</sup> ) Solid (tonnes)  |  |   |                                     |              | azardeue  |                        |                                       |                      |                    |
| Hazardous Liquid Industrial Other Liquid Waste Hazardous Non-Hazardous   |  |   |                                     |              | a∠aiu∪us  |                        |                                       |                      |                    |
| Change to Operations   |  |   |                                     |              |           |                        |                                       |                      |                    |
| No change proposed Change does not require fundamental design review Change requires fundamental design review                                     |  |   |                                     |              |           |                        |                                       |                      |                    |

# 4.4 Thermal Treatment Facility – Complete this information if thermal treatment takes place at this facility

| Waste Types for T  |                          | De                            | esign Capa           | city  |                |                   |                                    |  |
|--|--------------------------|-------------------------------|----------------------|---|----------------|-------------------|------------------------------------|--|
| Hazardous waste or liquid industrial waste                             |                          |                               | ≤ 100 to             | ≤ 100 tonnes per day > 100 tonnes per day                               |                |                   | es per day                         |  |
| Waste other than hazardous waste and liquid industrial waste           |                          |                               | e ≤ 100 to           | onnes per day   |                | > 100 tonne       | es per day                         |  |
| -  | Liquid Waste             |                               |                      |   |                |                   |                                    |  |
| Maximum Storage Ca   | pacity (m <sup>3</sup> ) |                               | Maxi                 | mum Residual fo   | or Final Disp  | oosal <i>(m³)</i> |                                    |  |
| Hazardous Liquid Industrial  | Other Liquid Waste Haz   |                               | ardous<br>Annually   | Liquid In<br>Daily  |                |                   | ither Liquid Waste<br>ily Annually |  |
|  |                          |                               | Solid Waste          |   |                |                   |                                    |  |
| Maximum Storage Capacity (tonnes)                                      |                          |                               |                      | Maximum Residual for Final Disposal (tonnes)                            |                |                   |                                    |  |
| Hazardous  | Non-Hazardous            | Non-Hazardous                 |                      | Hazardous   |                | Non-Hazardous     |                                    |  |
|  |                          | Daily                         | Annually             | ,   | Daily          | Annually          |                                    |  |
|  | Maxin                    | num Amour                     | nt of Waste to be Re | ceived Daily  | <u>.</u>       |                   |                                    |  |
|  | Liquid (m <sup>3</sup> ) |                               |                      |   | Solid (tonnes) |                   |                                    |  |
| Hazardous  | Liquid Industrial        | Of                            | ther Liquid Waste    | Ha  | azardous       |                   | Non-Hazardous                      |  |
| Maximum Daily Feed Rate (tonnes/m <sup>3</sup> )                       |                          |                               |                      |   |                |                   |                                    |  |
| Hazardous Waste (tonnes)   | Non-Hazardous            | bus Waste (tonnes) Liquid Inc |                      | Industrial Waste (m <sup>3</sup> ) Other Liquid Waste (m <sup>3</sup> ) |                | Liquid Waste (m³) |                                    |  |
| Change to Operations   |                          |                               |                      |   |                |                   |                                    |  |
| No change proposed Change does not require fundamental design review C |                          |                               |                      |   | Change re      | equires fundar    | nental design review               |  |

| <b>4.5 Landfill Site</b> – Complete this information if this facility operates as a landfill site |   |                    |                                 |  |  |                            |  |  |
|---|---|--------------------|---------------------------------|--|--|----------------------------|--|--|
| Waste Types to be Acc   | Design Capacity                                       |                    |                                 |  |  |                            |  |  |
| Hazardous waste or liquid in  | Hazardous waste or liquid industrial waste            |                    |                                 |  | $^{3} \leq 3 \text{ million m}^{3}$                            | > 3 million m <sup>3</sup> |  |  |
| Waste referred to in item 15 (uncontaminated tree stumps, le                                      |   |                    | ≤ 40,000 m <sup>2</sup>         | > 40,000 m   | > 40,000 m <sup>3</sup> $\leq$ 3 million m <sup>3</sup> > 3 mi |                            |  |  |
| Waste other than hazardous other than site referred to in   |   |                    | ≤ 40,000 m <sup>2</sup>         | 3 > 40,000 m   | > 40,000 m <sup>3</sup> $\leq$ 3 million m <sup>3</sup>        |                            |  |  |
|   |   | Maximum Landfil    | ling Capacity (m <sup>3</sup> ) | )  | -  | ·                          |  |  |
| Hazardous Waste   | Non-Hazai   | rdous Waste        | Liquid Industrial Waste         |  | Other Liq  | Other Liquid Waste         |  |  |
|   |   |                    |                                 |  |  |                            |  |  |
| Maximum Amount of Waste to be Received  |   |                    |                                 |  |  |                            |  |  |
| Hazardous Waste (tonnes)  | Hazardous Waste (tonnes) Non-Hazardous Waste (tonnes) |                    |                                 | Liquid Industrial Waste (m <sup>3</sup> ) Other Liquid Waste (m <sup>3</sup> ) |  |                            |  |  |
| Daily Annually  | ly Daily Annually                                     |                    | Daily                           | Annually   | Daily  | Annually                   |  |  |
|   | Landfill Information                                  |                    |                                 |  |  |                            |  |  |
| Area to be Landfilled Esti  | mated Date of   | Control Types (sel | ect all that apply)             |  |  |                            |  |  |
| (hectares) CI   | (hectares) Closure (y/m/d) Leacha                     |                    | Collection                      | Landfill Gas Collect   | ion None   | 9                          |  |  |
|   |   | Other (des         | Other (describe):               |  |  |                            |  |  |
|   |   |                    |                                 |  |  |                            |  |  |
| Change to Operations  |   |                    |                                 |  |  |                            |  |  |
| No change proposed Change does not require fu<br>or hydrogeological assessm                       |   |                    | ental design revie              |  | equires fundamenta<br>jeological assessme                      |                            |  |  |

# Section 5: Regulatory Requirements

| 5.1 Environmental Assessment Act (EAA) Requirements   |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| Are the works for which this proposal is made subject to (or exempted from) the requirements of the EAA<br>If "Yes," please check one of the following                        | ? Yes No  |  |  |  |  |  |
| The works for which this application is made are exempt from the requirements of the EAA u  | nder:   |  |  |  |  |  |
| Section of Ontario Regulation No.   | or  |  |  |  |  |  |
| Declaration/Exemption Order Number  |   |  |  |  |  |  |
| If Regulation, Declaration Order or Exemption Order does not refer directly to this facility, state in a facility – <b>Please provide supporting information</b>              | a covering letter or other document why it does apply to this |  |  |  |  |  |
| The works for which this application is made have fulfilled all of the requirements of the EAA Class EA process:  | through the completion of the requirements of a               |  |  |  |  |  |
| Name of Class EA:   |   |  |  |  |  |  |
| Schedule/Group/Category (if applicable):  |   |  |  |  |  |  |
| If applicable, please submit a copy of the completion documents.  |   |  |  |  |  |  |
| Were Part II Order requests received? Yes No If Yes, please submit  | t a copy of the Minister's decision letter.                   |  |  |  |  |  |
| The works for which this application is made have fulfilled all of the requirements for the EAA   | through:  |  |  |  |  |  |
| Completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the  | EAA.  |  |  |  |  |  |
| Please submit the Statement of Completion, and indicate if any Elevation Request(s)<br>If Elevation Request(s) were received, please submit a copy of the Director's decision |   |  |  |  |  |  |
| Completion of an Environmental Assessment   |   |  |  |  |  |  |
| Please submit a copy of the signed Notice of Approval.  |   |  |  |  |  |  |
|   |   |  |  |  |  |  |
| 5.2 Hearing under the Environmental Protection Act  |   |  |  |  |  |  |
| Is this application subject to a requirement for a mandatory hearing under s.30 of the <i>Environmental Prote</i><br>Yes No   | ection Act?   |  |  |  |  |  |
| 5.3 Environmental Bill of Rights (EBR) Requirements   |   |  |  |  |  |  |
| Is this a proposal for a prescribed instrument under EBR? Yes No  |   |  |  |  |  |  |
| If "Yes", is this proposal exempted from EBR requirements? Yes No   |   |  |  |  |  |  |
| If "Yes," please check one of the following   |   |  |  |  |  |  |
| This proposal has been considered in a substantially equivalent process or by a decision of a   | tribunal. Please provide supporting information               |  |  |  |  |  |
| This proposal is for an amendment to or revocation of an existing Certificate of Approval that is not environmentally significant.<br>Please provide supporting information   |   |  |  |  |  |  |
| This proposal is for an emergency situation. <i>Please provide supporting information</i>   |   |  |  |  |  |  |
| This proposal has been subject to or exempted from EAA Requirements. Please provide supporting information  |   |  |  |  |  |  |
| 5.4 Additional Public Consultation/Notification   |   |  |  |  |  |  |
| Has any additional public consultation / notification related to the project is in the process of being comple  | eted or has previously been completed (such as                |  |  |  |  |  |
| public hearings or notification of First Nations)   |   |  |  |  |  |  |
| Yes 1 res ,<br>1) describe the public consultation / notification below;<br>No 2) attach a separate list describing each of these consultation activities, the results a      | achieved, and planned future consultation activities.         |  |  |  |  |  |
|   |   |  |  |  |  |  |

# Section 6: Supporting Information

6.1 Supporting Information Checklist - This is a list of all supporting information to this application and is subject to the FOIPPA and EBR.

| Mandatory    | Attachment  | Attache   | ed       | Reference   | Confidential*<br>(√) |
|--------------|---|-----------|----------|---|----------------------|
|              | Proof of Legal Name of Applicant  | Yes       | No       |   |                      |
|              | Copy of NEPDA Permit  | Yes       | No       |   |                      |
|              | Copy of Municipal Planning Approval (ORMCA)   | Yes       | No       |   |                      |
|              | Reference Plan  | Yes       | No       |   |                      |
|              | Name, Address and Phone Number of the<br>Operating Authority  | Yes       | No       |   |                      |
|              | Name, Address and consent of land/site owner<br>for the installation/construction and operation of<br>the works/facility  | Yes       | No       |   |                      |
|              | Verification of EBR Public Participation<br>Exception   | Yes       | No       |   |                      |
|              | Record of Public Consultation Report  | Yes       | No       |   |                      |
|              | Zoning Confirmation from the Municipality   | Yes       | No       |   |                      |
|              | Site Plan/Location Map with Geo-referencing<br>point(s) identified  | Yes       | No       |   |                      |
|              | Design and Operations Report  | Yes       | No       |   |                      |
|              | Drainage Study  | Yes       | No       |   |                      |
|              | Hydrogeolocial Assessment Report  | Yes       | No       |   |                      |
|              | Waste Comprehensive Requirements 1. Engineers Report 2. Declarations  | Yes       | No       |   |                      |
|              | Application Fee   | Yes       | No       |   |                      |
|              | Financial Assurance/ Financial Assurance<br>Estimates   | Yes       | No       |   |                      |
|              | A copy of this application has been sent to the local district office   | Yes       | No       |   |                      |
|              | A copy of this application has been sent to the local municipality  | Yes       | No       |   |                      |
|              | Record of EA Process:<br>1. Class EA Completion documents, or<br>2. Environmental Screening Process- Statement of<br>Completion, or<br>3. Individual EA – Notice of Approval. | Yes       | No       |   |                      |
| Other Attach |   |           |          |   |                      |
| Title        |   | Reference |          |   | Confidential*<br>(√) |
|              |   |           |          |   |                      |
|              |   |           |          |   |                      |
|              |   |           |          |   |                      |
|              |   |           |          |   |                      |
|              |   |           |          |   |                      |
| Are you atta | ching an additional list of attachments?<br>Yes No  |           | package, | a space to list all of the attachments included in this please include an additional listing of these |                      |

\*Please note: the release of information contained in application forms and documentation submitted in support of applications for approval is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. This Act defines what may and may not be disclosed to the public, and is used to assess all requests for information contained in the documents on file with an application for approval. The information submitted with an application for approval may also be subject to the *Environmental Bill of Rights*. In those situations, the application and the associated non-confidential supporting documentation is made available for review by members of the public. The applicants should therefore identify all documents as noted above which are to be considered confidential and must provide detailed evidence in support of this claim. This evidence will be one of the factors the ministry would consider when making a decision regarding disclosure of specific documents on file.



# Payment Information: Application for a Provisional Certificate of Approval for a Waste Disposal Site

#### Please Note:

- 1. If you are completing this form by hand, you must attach a copy of the form titled "Costs for EPA s.27 (Waste Management) Applications Supplement to Application for Approval" (PIBS 4186). You do not need to attach the supplemental form if you are filling in this form electronically.
- If you are completing this form electronically, the fees for this application have been calculated based on the information you have provided. The Ministry may require additional information during the review of your application that could impact the total fee required.
- 3. All fees should be paid in Canadian funds, payable to the Ontario Minister of Finance.
- 4. Credit card payments are accepted for payments under \$10,000 only.
- 5. If you are paying by certified cheque or money order, please staple your payment to this page.
- 6. Do not include this page in the copies of your application that are being provided to the local MOE Office or the local municipality(s).
- 7. The information collected in this section of the form is considered confidential and will only be used to process your application fee.

| Amount Enclosed | Method of Payment |             |                  |
|-----------------|-------------------|-------------|------------------|
| ¢               | Certified Cheque  | Money Order | Journal Entry    |
| Φ               | Visa              | MasterCard  | American Express |

#### Credit Card Information (if paying by VISA, MasterCard or American Express)

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