

Source Water Protection: Restricted Land Use (Section 59) Review Form

Completion of this screening review form is required for planning and/or building permit applications on properties located within Wellhead Protection Areas that are subject to Section 59 Restricted Land Use in the *Clean Water Act, 2006*. Please consult with the CBO or Area Planner to determine if your property is within such an area. In these areas, a notice from the Risk Management Office is required for a planning and/or building permit application to be deemed complete. Completion of this form is not required if the planning or building permit application is exclusively for residential use/development.

Have you received a Section 59 Notice from the Risk Management Official for a previous planning or building permit application for the same project on the same property? Yes No

Section 1: Registered Owner(s):

Name:		Phone:
Address:		Alternate Phone:
		Fax:
Postal Code:	Email Address:	

Applicant (if other than registered owner):

Name:		Phone:
Address:		Alternate Phone:
		Fax:
Postal Code:	Email Address:	

Section 2: Location of Subject Lands

Municipality:		
Lot(s):	Part(s):	Concession:
Street and/or 911 Address:		

Section 3: Nature of Application

Brief description of Proposal (specific focus on what activities are or will be occurring on the property) :
Type of Application being applied for and application number (if known):

Section 4: Please check all activities that MAY be existing onsite or associated with the proposed development application

<p>Fuel Handling and Storage</p> <p><input type="checkbox"/> Liquid fuel and fuel oil</p> <p><input type="checkbox"/> Home heating, retail outlets, bulk plant, farms</p> <p>Chemical Handling and Storage</p> <p><input type="checkbox"/> Automotive</p> <p><input type="checkbox"/> Dry-cleaning</p> <p><input type="checkbox"/> Industrial manufacturing and processing</p> <p><input type="checkbox"/> Industrial/commercial strength cleaning agents</p> <p>Snow or Salt</p> <p><input type="checkbox"/> Snow storage</p> <p><input type="checkbox"/> Salt storage</p> <p>Waste Disposal</p> <p><input type="checkbox"/> Raw, untreated liquids and solids that are pumped out of septic systems and holding tanks</p> <p><input type="checkbox"/> Disposal of hazardous, liquid, industrial or commercial waste, municipal waste</p> <p><input type="checkbox"/> Mine tailings</p>	<p>Storm Water Management</p> <p><input type="checkbox"/> Storm water management facility</p> <p><input type="checkbox"/> Car or truck washing facility</p> <p><input type="checkbox"/> Sewage treatment plant effluent discharges</p> <p><input type="checkbox"/> Sewer systems and related pipes</p> <p>Septic System</p> <p><input type="checkbox"/> Small septic for residential or small-scale commercial/industrial/institutional</p> <p><input type="checkbox"/> Large septic system (>10,000L/day) for commercial/industrial/institutional</p> <p>Agricultural</p> <p><input type="checkbox"/> Application, handling and storage of fertilizers or pesticides</p> <p><input type="checkbox"/> Application, handling or storage of manure or non-agricultural source material (i.e. biosolids)</p> <p><input type="checkbox"/> Grazing and pasturing of livestock or outdoor yards or confinement areas</p>
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Section 5: Declaration (Owner or Applicant)

I, the undersigned, hereby declare that all the information provided on this form is correct and complete to the best of my knowledge.

Owner Name:
PLEASE PRINT

Signature: _____ Date: _____

Applicant Name:
PLEASE PRINT

Signature: _____ Date: _____

Notes The collection of personal information on this form is legally authorized under Sec. 54 of the Clean Water Act for the purposes of implementing Part IV of the Act. Questions about this collection should be directed to the Coordinator of Source Protection Program at Oxford County 21 Reeve Street, P.O. Box 1614, Woodstock, ON, N4S 7Y3 or (519) 539-9800. All information in the Source Protection Restricted Land Use Review Form is subject to the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). Information may also be provided to the Ministry of Environment, Conservation and Parks, other regulatory bodies and/or local municipalities.

For Risk Management Office Use Only

Source Protection Area:	Municipal Well field and Well:
Wellhead Protection Area(s) (WHPA) and Vulnerability Score(s):	
Results and Actions:	

Should you have any questions or concerns while filling this form out please contact the Oxford County Source Protection Program Coordinator at 519-539-9800 Ext. 3126 or sourcewaterprotection@oxfordcounty.ca