

SITE SCREENING APPLICATION

CONSERVATION AUTHORITIES ACT - April 2023

PART 1: GENERAL INFORMATION

SITE SCREENING APPLICATION:

1. This form is to be used for all proponents or consultants requesting site screening information from TRCA.
2. Singular or multiple sites can be requested on a single form if related to the same project.
3. It is recommended that a pre-application consultation be requested for all applications. These consultations are conducted virtually. Send your request to: InfrastructurePlanningPermits@trca.ca

NEED ASSISTANCE?

1. Should you need assistance in completing this application form or confirming submission requirements, please send your enquiry to: InfrastructurePlanningPermits@trca.ca
2. A planner or administrator will respond to you within one business day (24 hours)

PART 2: APPLICANT INFORMATION - ALL INFORMATION BELOW IS MANDATORY

PROPONENT DETAILS

Main Contact:			
Organization:			
Mailing Address:			
City:		Postal Code:	
Phone No.:		E-mail:	

CONSULTANT DETAILS

Main Contact:			
Company Name:			
Mailing Address:			
City:		Postal Code:	
Phone No.:		E-mail:	

Note: Correspondence will be sent to the Proponent and copied to the Consultant

PART 3: PROJECT INFORMATION - ALL INFORMATION BELOW IS MANDATORY

PROJECT NAME AND LOCATION

Project Name:	
Project Location or Address:	
Nearest Major Intersection:	
Municipality:	

A site map showing the location is attached.

<input type="checkbox"/> Yes* (required) <input type="checkbox"/> No (application will be deemed incomplete)
UTM Coordinates (if known):
PROJECT DETAILS
Description of proposed works:
Is this project related to an environmental assessment application? <input type="checkbox"/> No <input type="checkbox"/> Yes - What was the TRCA CFN Number? _____
Is this project related to a Planning Act application? <input type="checkbox"/> No <input type="checkbox"/> Yes - What was the TRCA CFN Number? _____
Is this project related to a TRCA Permit or Voluntary Project Review application? <input type="checkbox"/> No <input type="checkbox"/> Yes - What was the TRCA CFN Number? _____
Have you conducted any pre-application consultation with a Planner at TRCA to determine site constraints and technical requirements for a "complete" application? (A pre-application consultation may be in the form of a phone conversation, a meeting, email messages, or site visit) <input type="checkbox"/> No <input type="checkbox"/> Yes IF YES, NAME OF PLANNER: _____ CFN (If known) _____
Please supplement this application form with additional sheets detailing project locations as required. Note that screening fees are required for each location. At the discretion of TRCA staff, screening of some sites may be combined, and the required application fee thereby reduced.

PART 4: SUBMISSION REQUIREMENTS - ALL INFORMATION BELOW IS MANDATORY

APPLICATION SUBMISSION

- Email your request for site screening, together with the above information to your planner (if known), or to: InfrastructurePlanningPermits@trca.ca.
- A planner or administrator will respond to you within one business day (24 hours).

PAYMENT INFORMATION

- Each application requires review fees be submitted as noted on the [TRCA Administrative Fee Schedule for Environmental Assessment and Infrastructure Permitting Services](#) (Fee Schedule), as may be amended.
- TRCA will confirm fees and if required, invoice required fees within 5 business days of receipt of the application.
- Additional fees also apply to requests for additional meetings or site visits, also as prescribed in the Fee Schedule. A separate invoice will be provided within 5 business days of confirmation.
- The site screening fee is deducted from future applications if made to TRCA related to the subject property and proposal that are the subject of this application.

Payment to be made by:

- ☐ Proponent ☐ Consultant ☐ Service Level Agreement

Payment Details:

1. Payments can be made by cheque, credit card or electronic fund transfer (EFT). TRCA contact information and payment details will be provided on the invoice.
2. The invoice number, assigned planner's name, and the permit central file number (CFN) are required for all payments to be processed.

PART 5: AUTHORIZATIONS AND ACKNOWLEDGEMENTS - ALL INFORMATION BELOW IS MANDATORY

GENERAL AUTHORIZATION

By signing this application, authorization is given:

1. To TRCA staff, agents, representatives, or other persons as may be reasonably required by TRCA, in its opinion, to enter the premises without notice at reasonable times for the purpose of considering a request for a permit, inspecting, obtaining information, and/or monitoring any and all works, activities and/or construction pertaining to the property in addition to the works as approved under cover of any permit issued by TRCA, and to conduct all required discussions with the Proponent, their agents, consultants or representatives with respect to the works.
2. For the inclusion of permit and VPR conditions as per Appendix A: Approved Permit and VPR conditions, on the permit or VPR should approval be granted or issued, respectively. The permit or VPR letter holder also agrees to comply with the terms and conditions as imposed. For Infrastructure related permit or VPR applications, "Owner" references are the "Proponent".
3. Any false or misleading statement made on this application will render null and void any permission granted.

*** Signature from the Proponent is mandatory**

***Proponent's Signature:**

Date:

PROPONENT AUTHORIZATION FOR A CONSULTANT TO ACT ON THEIR BEHALF

If this application is submitted by a Consultant on behalf of the Proponent, Authorization must be completed and signed by the Proponent. If the application has been prepared by a Consultant, such authorization should not be given until the application and its attachments have been examined by the Proponent.

By signing this section of the application I/we, the Proponent, _____
(Proponent's Name) hereby authorize _____ (Consultant's Name) to
provide as my Consultant any required authorizations or consents, to submit the enclosed application to the Toronto
and Region Conservation Authority, and to appear on my behalf at any hearing(s) of the application and to provide
any information or material required for the purposes of obtaining a permit in accordance with the requirements of
the Conservation Authorities Act.
Dated at the City/Town of _____.

I/we also solemnly declare that to my best knowledge and belief, all the above information, plans and submissions to
be true, valid, and current. I further accept the aforementioned inclusions, terms and conditions to be binding. My
signature acknowledges the right to exercise binding authority.

***Signature or written authorization is mandatory to allow Consultant Authorization to proceed.**

***Proponent's Signature:**

Date:

NOTICE OF COLLECTION

Pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, the personal information contained on this form is collected under the authority of the *Conservation Authorities Act*. This information is used to assess applications. Information submitted as part of this application may be disclosed to government and municipal agencies for review and comment, or to members of the public through the freedom of information process. Questions about the collection of information should be directed the information and privacy officer, at [Freedom of Information Request - Toronto and Region Conservation Authority \(TRCA\)](#). Any false or misleading statement made on this application will render null and void any permission granted.

I _____, the Proponent, of _____ (Print Name) (Corporation, if any) Solemnly declare that to my best knowledge and belief, all the above information, plans and submissions to be true, valid, and current. I further accept the aforementioned inclusions, terms and conditions to be binding. My signature acknowledges the right to exercise binding authority.

***Signature or written authorization from the Proponent is mandatory.**

***Proponent's Signature:**

Date:

Consultant's Signature:

Date:

COMPLETE APPLICATION ACKNOWLEDGEMENT

I/we acknowledge that information provided in this application is complete and accurate. Further, I/we recognize that all fees must be paid prior to the release of TRCA site screening information.

***Signature or written authorization from the Proponent is mandatory.**

***Proponent's Signature:**

Date:

Consultant's Signature:

Date: