

PERMIT APPLICATION FOR AN EXEMPTION

PLEASE PRINT CLEARLY USING BLACK INK

All Sections are to be filled out completely. Failure to do so will make this application null and void, and it may be returned to the applicant for correction, thereby **delaying issuance of the Permit.**
Completed forms must be sent to: Bruce County Transportation and Environmental Services 30 Park Street,PO Box 398, Walkerton, Ontario N0G 2V0 Fax:(519) 507-3030 Email:transportationinfo@brucecounty.on.ca

PERMIT IS VALID FOR ONE YEAR AFTER DATE OF ISSUANCE.

Name(s) of Owner: _____

Emergency (911) Street Address of Owner: _____

Box / RR#:_____Town/City:_____Postal Code : _____

Telephone: Home:_____Work:_____Email/Fax: _____

Location of Woodlot

New Municipality_____Former Township _____

Lot__ Concession_____Emergency (911) for woodlot address: _____

13 Digit Assessment Roll #: 41-_____

Property owned by applicant? _____ YES _____ Length of Time Owned by Applicant: _____
_____ NO (if no, authorizing letter must be attached)

Property / Forest Description

This application is requesting permission to remove the following (please indicate)

Total Number of Woodland Hectares (Acres) on the Property :_____ ☐ Acres ☐ Hectares

If the woodland has been harvested in the past three years, state name of contractor and date of harvesting activities.

Description of tree species on the described land: _____

Description of tree species to be destroyed on the described land: _____

This Exemption is requested for the following reasons, including description of end use after trees have been destroyed:

Draw a map of the land which you own and identify NORTH, abutting lots, concessions and property owners. Map should show description of lands of the Owner, a description of species and extent of trees subject of this specific Council Exemption Application. (If more space is required please use a separate sheet and attach to application)

Indicate North



Exemption Requirements / Information

- I. An Exemption application must be completed in full in order to be processed.
- II. It shall be normal practice that when an owner or his authorized agent makes an enquiry with regard to Forest Conservation By-law No. 4071, that the Officer will make an inspection of the property to determine whether or not an application for an Exemption is necessary.
- III. An information summary describing the application area and the forest cover components will be prepared by the Officer.
- IV. If the application is approved an on-site inspection will be made and the perimeter of the forest cover which will remain will be marked by tree marking paint or some other means, to clearly indicate the extent of the approved Council Exemption area. Trees destroyed outside any approved area will be considered a violation under the Forest Conservation By-law.

I agree that this application has been completed in compliance with the provision of Forest Conservation By-law No. 4071 of the Corporation of the County of Bruce and that I am familiar with the requirements of this By-law.

Applicant's Signature _____ Date _____

Personal information on this form is collected under the authority of the *Municipal Act*. Pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, questions about the collection of personal information should be directed to the Clerk.

PLEASE FORWARD THIS FORM TO:
 BRUCE COUNTY TRANSPORTATION AND ENVIRONMENTAL SERVICES DEPT
 EMAIL: transportationinfo@brucecounty.on.ca PHONE (519)881-1291 FAX(519)507-3030

For Office Use Only:

The Permit for Exemption is hereby:

☐ Refused for the following reasons:

☐ Granted

☐ Granted with the following conditions:

DATE OF ISSUANCE OF PERMIT: _____

DATE OF EXPIRY OF PERMIT: _____

Signature of Officer