DISTRICT OF MISSION SOIL DEPOSIT BYLAW 5506-2015

SCHEDULE 'A'

SOIL DEPOSIT APPLICATION AND PERMIT

Applicant Information (To be filled out by applicant)

Name of company	Applicant (If company, insert company name and individual representa	
Applicant	's address	
Contact t	elephone number	
Project d	escription	
LAND ID	ENTIFICATON INFORMATION	
Legal des	scription	
	ress	
LAND O	WNERSHIP	
Registere	ed owner	
Address	of owner	
Lease Ho	older	
Address	of Lease Holder	
Upon appa permit:	proval of this application I/we hereby guarantee to fulfill the following co	onditions prior to the issuance of
a)	Pay the application fee in the amount of	\$
b)	Provide the required security in a form acceptable to the Engineer	\$
c)	Pre-pay or submit the Soil Deposit fee on a monthly basis	\$

SOIL DEPOSIT INFORMATION (to be prepared by the Qualified Professional) Estimated quantity to be deposited _____ Type of material Estimate prepared by ______ Signature Seal **CONSULTANT'S INFORMATION** Attached, as part of this application, is the following information as provided for in Section 6h of this bylaw: (Title) (Author) (Date) 1. 2. 3. _____, as applicant on my own behalf, or as authorized signatory for the applicant (print company name) make application. I confirm that the applicant has the authority to deposit the soil substance as provided by in this application. Declared the day of , 20 . Signature of applicant Authorized signature of owner NOTE: The issuance of this permit does not relieve the permit holder from complying with all applicable Federal and Provincial laws. This Soil Deposit Permit is issued pursuant to the District of Mission Soil Deposit Bylaw No. 5506-2015

Date

Engineer (signature)