

9848 Aberdeen Road Fax: (250) 550-3701 info@rdno.ca

## **Application for Campground Permit or Manufactured Home Community Permit**

RDNO File #:	
Application Fee: \$	
Receipt No.:	
Date Received:	
Received by:	

Office Use Only:

☐ Campground Permit	☐ Manufactured Home Community Permit
LOCATION	
Legal Description:	
PID:	
Civic Address:	
APPLICANT	EMAIL:
Applicant Name:	
Address:	Postal Code:
Phone No. (primary):	Phone No. (secondary):
Date:	Signature:
PROPERTY OWNER	EMAIL:
Owner Name(s):	
Address:	Postal Code:
Phone No. (primary):	Phone No. (secondary):
This application is made with my full knowledge and consent:	
Date:	Signature:
Date:	Signature:
	ion must be signed by the registered owner(s), or their authorized e) must accompany this application form.
PROPERTY DETAILS	
Size of Property (area):	
Present Zoning:	
Description of Existing Uses and Buildings (use separate sheet	if necessary):

DEVELOPMENT PROPOSAL  Description of Development Proposal or Text Amendment (use separate sheet if necessary):					
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	Currently	Evicting	Peadily	Available	
<u>Services</u>	Yes	No	Yes	No	<u>Details</u>
Road Access					
Water Supply					
Sewage Disposal					
Hydro Telephone					
•	П				
School Bus Service					
Proposed Water Supp	ply Method:				
Proposed Sewage Di	sposal Metho	d:			
Justification/Rational	e in Support o	of the Applica	tion (a suppl	emental lett	er of rationale is encouraged):
	очррого	/	(ж. сарр.	<u> </u>	o. o
Required documen	tation to be	submitted	with appli	cation for	m·
☐ Application fee.	tation to be	Submitted	with appli	cation for	
☐ Agent Authorizati	on Form (if a	oplicable).			
☐ Title Search or a	Certificate of	Indefeasible	Title dated n	o more thar	n 30 days prior to submission of application.
					orking drawings to scale showing:
☐ The area, dimens	_		•	` '	
	<ul> <li>□ The dimensions and location of the buffer area required under Section 1301.13 of Zoning Bylaw No. 1888, 2003;</li> <li>□ The number, location, dimensions, and designation of all camping spaces, and location and dimensions of all roadways,</li> </ul>				
					storage area (if any);
☐ The location of service buildings, any sewage-disposal station, or any other proposed structures;					
The internal layouts of all service ancillary buildings and other structures, apart from the owner's residence;					
☐ The location and details of the source of water, treatment plants, water distribution lines, and outlets; ☐ The location and details of all connections to the sewer, sewer-lines, sentic tank(s) and sub-surface disposal field, or other					
☐ The location and details of all connections to the sewer, sewer-lines, septic tank(s) and sub-surface disposal field, or othe private sewage treatment plants and disposal methods;					
☐ The location of storm drains and catch basins;					
<ul> <li>☐ The location and details of all on-site garbage and refuse disposal areas;</li> <li>☐ A north arrow and notation of scales used;</li> </ul>					
<ul><li>□ A general landscaping plan for the site;</li><li>□ All watercourses or water frontage within or adjacent to the proposed campground;</li></ul>					
☐ All steep banks or slopes within or adjacent to the land concerned;					
☐ The relationship of the proposed camparound to adjacent roads and highways.					

The General Manager, Planning and Building may require the applicant to provide additional relevant information, including but not limited to topographic and soil condition data.



## SCHEDULE 1 SITE DISCLOSURE STATEMENT

## I. CONTACT INFORMATION

**DEGREES** 

A: SITE OWNER(s) or OPERATOR(s)					
LAST NAME			FIRST NAME(s)		
COMPANY (if applicable)					
ADDRESS - STREET			CITY		
PROVINCE/STATE	COUNTRY		I	POSTAL CODE	
PHONE		E-MAIL			
B: PERSON COMPLETING SITE DISCLOSURE ST					
Agent authorized to complete form on beha	If of the owner	or operate	or		
LAST NAME		FIRST NAME(s)			
COMPANY (if applicable)					
C: PERSON TO CONTACT REGARDING THE SIT	E DISCLOSURE	STATEME	ENT		
LAST NAME		FIRST NAI			
			. ,		
COMPANY (if applicable)					
,					
ADDRESS - STREET CIT			CITY		
PROVINCE/STATE	COUNTRY		<u> </u>	POSTAL CODE	
PHONE		E-MAIL			
II. SITE INFORMATION					
Coordinates (using the North American Datum 1983 convention) for the centre of the site:					
Latitude			Longitude		
<u> </u>		<b>.</b>	<del>_</del>		

Attach a map of appropriate scale showing the location and boundaries of the site.

**SECONDS** 

DEGREES

MINUTES

SECONDS

MINUTES

For Untitled Crown Land  PIN numbers and associated Land Description (if applicable)  PIN Land Decription Add Delete + - + -	For Legally Titled, R SITE ADDRESS (or neares	egistered Property st street name/intersection if no address assigned)		
PID Land Decription Add Delete				
For Untitled Crown Land  PIN numbers and associated Land Description (if applicable)  PIN Land Decription Add Delete + - + -  And if available  Crown Land File Numbers Add Delete + - + -  III. INDUSTRIAL OR COMMERCIAL PURPOSES OR ACTIVITIES  Has the site been used for any industrial or commercial purposes or activities described in SCHEDULE 2 of the Contaminated Sites Regulation?  Yes No  If you answered YES to the question above, please indicate below, in the format of the example provided, which of the industrial or commercial purposes or activities have occurred or are occurring on this site.  EXAMPLE  Schedule 2 Reference Description  E1 appliance, equipment or engine maintenance, repair, reconditioning, cleaning or salvage F10 solvent manufacturing, bulk storage, shipping or handling  Schedule 2 Reference Description Add Delete  Pescription Add Delete  Description Add Delete	CITY	POSTAL CODE		
For Untitled Crown Land  PIN numbers and associated Land Description (if applicable)  PIN Land Decription Add Delete	PID	Land Decription	Add	Delete
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PIN numbers and associated Land Description (if applicable)  PIN			+	-
PIN Land Decription Add Delete	For Untitled Crown I	_and		
And if available  Crown Land File Numbers  Add Delete  + -  III. INDUSTRIAL OR COMMERCIAL PURPOSES OR ACTIVITIES  Has the site been used for any industrial or commercial purposes or activities described in SCHEDULE 2 of the Contaminated Sites Regulation?  Yes No  If you answered YES to the question above, please indicate below, in the format of the example provided, which of the industrial or commercial purposes or activities have occurred or are occurring on this site.  EXAMPLE  Schedule 2 Reference  E1 appliance, equipment or engine maintenance, repair, reconditioning, cleaning or salvage  F10 solvent manufacturing, bulk storage, shipping or handling  Schedule 2 Reference  Description  Add Delete  + -  + -	PIN numbers and ass	ociated Land Description (if applicable)		
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# - # - # - # - # - # - # - # - # - # -	And if available			
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E1 appliance, equipment or engine maintenance, repair, reconditioning, cleaning or salvage  F10 solvent manufacturing, bulk storage, shipping or handling  Schedule 2 Reference Description Add Delete  + -  + -	industrial or commerc		ch of th	е
F10 solvent manufacturing, bulk storage, shipping or handling  Schedule 2 Reference Description Add Delete  + -  + -	Schedule 2 Reference	Description		
Schedule 2 Reference Description Add Delete + - + -	E1	appliance, equipment or engine maintenance, repair, reconditioning, cleaning or salvag	je	
+ -	F10	solvent manufacturing, bulk storage, shipping or handling		
+ -	Schedule 2 Reference	Description	Add	Delete
			+	-
IV. ADDITIONAL INFORMATION			+	-
IV. ADDITIONAL INFORMATION	W/ ABBURGAL-			1
	IV. ADDITIONAL IN	IFORMATION		

2. Indicate the information used to complete this site disclosure statement including a list of record searches completed.
3. List any past or present government orders, permits, approvals, certificates or notifications pertaining to the environmental condition of the site. (Attach extra pages, if necessary):

V. DECLARATIONS			
1. Exemptions (See the Conta	aminated Sites Regulation,	Division 3 of Part 2):	
Does the application qualify	y for an exemption from sub	omitting a site disclosure statemer	nt?
☐Yes ☐ No			
If yes, indicate which exen	nption applies		
Where a municipal approva	al is not required, please inc	dicate the reason for submission o	directly to the registrar:
Under Order	Foreclosure	CCAA Proceedings	BIA Proceedings
_	_		
Decommissioning	Ceasing Operations	S	
By signing below, I confirm	that the information in th	is form is complete and accura	te to the best of my knowledge:
SIGN	NATURE		DATE SIGNED (YYYY-MM-DD)
			,
APPROVING AUTHORITY CON	ITACT INFORMATION		
NAME		AGENCY	
ADDRESS			
PHONE		E-MAIL	
		'	
Reason for submission (Pleas	se check one or more of the	e following):	
☐ Building Permit	Subdivision	Zoning	Development Permit
DATE DECEN	CD (0000/MM DD)	DATE OUR WITTER	TO DECICEAD (MANA ANA ES)
DATE RECEIVE	D (YYYY-MM-DD)	DATE SUBMITTED I	O REGISTAR (YYYY-MM-DD)