

1 OWNER/CONTRACTOR

	LAND OWNER	TREE CUTTING CONTRACTOR
Name:		
Mailing Address:		
Phone:	()	()
Fax:	()	()

2 DESCRIPTION OF LAND

Legal Description:	Lot:	Concession:	Plan No.:
Municipal Address:			

3 INFORMATION ON PROPERTY AND TREE/WOODLOT

Attach proper drawings and survey showing:

- Limits of land owner's property
- Adjacent roads
- Man-made features on the property such as fence lines, rail lines and buildings
- Natural features such as streams and wetlands
- Location, extent and size of woodlot where trees are to be destroyed

Describe the trees to be destroyed:

- Numbers
- Species
- Size (dbh)
- Approximate age
- Location on property

Describe the type of woodlot

- Mixed wood
- Conifer Plantation (Red Pine, etc.)
- Other Describe

4 TIME PERIOD

Expected Starting Date: _____

Expected Completion Date: _____

5 HAS THE MINISTRY OF NATURAL RESOURCES OR A FORESTRY CONSULTANT MARKED THIS TREE/WOODLOT FOR DESTRUCTION?

Yes No

Name:
Mailing Address:
Phone:
Fax:

6 DESCRIBE THE PURPOSE OR REASON FOR THE TREE DESTRUCTION AND THE METHOD OF DESTRUCTION (I.E. CUTTING, BURNING, ETC.)

7 A copy of any report prepared by a forestry consultant respecting the destruction of trees subject to this application shall accompany this application.

8 Where the Tree Cutting Contractor is different from the applicant, a copy of any contract between the applicant and the Tree Cutting Contractor respecting the destruction of trees subject of this application shall accompany this application.

9 AFFIDAVIT OF APPLICANT

The applicant must be the owner of the lands. If there are multiple owners, only one owner shall be considered the applicant and shall complete this Section., Authorization from all other owners of the land regarding this application, as set out in Schedule "C" to this By-law, shall be attached to this application.

AFFIDAVIT	
I, _____	
of the _____	
in the Regional/Metropolitan of _____	
being the registered owner of the lands subject to this application, solemnly declare that all the above statements contained within this application are true, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath, and by virtue of "The Canada Evidence Act". I agree that the work to destroy trees will be conducted in accordance with the Municipality of Clarington By-law No. 97-35, and that I am familiar with the contents and requirements of that By-law and acknowledge having received a copy thereof. I also agree to allow the Municipality of Clarington, its employees and agents to enter upon the subject lands for the purpose of conducting any inspections that may be necessary to this application.	
Declared before me at the _____	
in the Regional/Metropolitan of _____	
this _____ day of _____	
_____ A Commissioner of Oaths	_____ Signature of Applicant

10 LAND OWNER'S AUTHORIZATION

AUTHORIZATION OF LAND OWNER	
I, _____ being the registered owner of the land that is the subject	
of this planning document hereby authorize _____ to	
(type or print name of applicant)	
prepare and submit this application for approval.	
_____ Signature of Owner	_____ Date

To be completed by Tree Cutting Contractor (if different from applicant)

I agree that the work to destroy trees on the property owned by _____
_____ and Municipally known as _____

will be conducted in accordance with the Municipality of Clarington By-law No. 97-35 and the permit issued under that By-law to the owner of the land. I also agree that I am familiar with the contents and requirements of By-law 97-35 and the permit issued pursuant to it, and acknowledge having received a copy of both the By-law and the permit. In signing this application, I also agree that I am acting with the full authority and permission of the landowner and on his/her behalf.

Name: _____

Signature: _____

Dated at _____ this _____ day of _____ 20__.

NOTICE TO APPLICANT

YOU MAY APPEAL TO THE ONTARIO MUNICIPAL BOARD:

1. If the Director refuses to issue a permit, within thirty (30) days after the refusal.
2. If the Director fails to make a decision on an application, within forty-five (45) days after the completed application is received by the Director; or
3. If a permit is issued, but you object to a condition in the permit, within thirty (30) days after the issuance of the permit.

Notice of Appeal should be mailed or delivered to:

Ontario Municipal Board
Suite 1500
655 Bay Street
Toronto, Ontario
M5G 1E5

The cost of the appeal (presently **\$125.00** with each related appeal being an additional **\$25.00**) shall be payable by cheque, made payable to the **Minister of Finance** and must accompany this Notice of Appeal.



**APPLICATION TO DESTROY TREES
THE MUNICIPALITY OF CLARINGTON
PLANNING SERVICES DEPARTMENT**

MUNICIPALITY OF CLARINGTON BY-LAW 97035

WOODLOT PRESERVATION BY-LAW

APPLICATION FEE SCHEDULE

The following fees shall be payable for applications submitted pursuant to Section 6 of By-law 97-35:

1. The destruction of trees in a woodlot 2 ha in area of less \$25.00
2. The destruction of trees in a woodlot greater than 2 ha in area \$50.00
3. The destruction of trees on lands designated “Environmental Protection Area” on Map A of the Official Plan, or located within 120 metres of a wetland identified on Map C of the Official Plan..... \$75.00

APPLICATION PACKAGE MUST BE SUBMITTED TO:

Planning Services Department
Municipality of Clarington
40 Temperance Street
Bowmanville, Ontario L1C 3A6
Phone: (905) 623-3379 Fax: (905) 623-0830