

Environmental Compliance Approval Application

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Environmental Compliance Approval Application

General Information and Instructions

General Information

Information requested in this form is collected under the authority of the *Environmental Protection Act* (EPA), *Ontario Water Resources Act* (OWRA) and Environmental Bill of Rights (EBR), and will be used to evaluate applications for Environmental Compliance Approvals (ECAs) issued under Part II.1 of the EPA. This application form should not be used for mobile PCB destruction facilities.

For all questions related to preparing or submitting this form or about the Ministry's collection of information related to applying for an ECA, contact:

Client Services and Permissions Branch 135 St. Clair Ave. West, 1st Floor Toronto Ontario M4V 1P5 Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions

- 1. Applicants are responsible for ensuring that they complete the most recent application form. Application forms and information about the required supporting documentation and technical requirements are available from the Client Services and Permissions Branch (the address and phone number are provided in the General Information on this page). As well, you can get this information from your local District Office of the Ministry of the Environment and Climate Change, and online at: https://www.ontario.ca/page/environmental-approvals
- 2. A complete application consists of:
 - · a completed and signed application form;
 - · all required supporting documents and technical requirements identified in:
 - i. this form,
 - ii. Ministry guidance,
 - iii. the Applications for Environmental Compliance Approvals regulation, and
 - payment of the application fee (in Canadian funds) by certified cheque or money order made payable to the
 Minister of Finance, or credit card payment (for payments up to \$10,000). For Transfer of Review, make the cheque or
 money order payable to the appropriate municipality. The Ministry may return or refuse incomplete applications to
 the applicant. The Director may require additional information of any application initially accepted as complete.
- 3. Submit the complete application as follows:
 - One (1) paper copy (unless the application is a Transfer of Review), one (1) electronic copy and the fee to the Director, Client Services and Permissions Branch at the address provided in the General Information on this page.
 - If the application is a Transfer of Review, the applicant must submit two (2) copies of the completed application and the fee to the designated municipal authority.
- 4. The applicant must also send a copy of the application without the fee to the local Ministry District Office that has jurisdiction over the area where the facilities are located. DO NOT send payment to the District Office.
 - To locate the appropriate local Ministry District Office, visit the Ministry of the Environment and Climate Change website at: http://www.ontario.ca/environment-and-energy/ministry-environment-and-climate-change-regional-and-district-offices
- 5. For Waste Disposal Sites the applicant must also send a copy of the application without the fee to the Clerk's office of the local municipality (both upper and lower tier) in which the facility/proposed facility is located unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality. DO NOT send any payment information to the municipality.

Information collected by the Ministry of the Environment and Climate Change is subject to the *Freedom of Information and Protection of Privacy Act (FIPPA)*. If the applicant is of the view that any part of the application is confidential on the grounds that such information constitutes a trade secret or scientific, technical, commercial, financial or labour relations information, please make this known now. Otherwise, the Ministry may make the information available to the public without further notice to the applicant.

It is an offence under the EPA and OWRA to provide false or misleading information in this application and/or accompanying documents.

Complete the sections as shown below.

- Section 1: Applicant Information
- Section 2: Project Information
- Section 3: Regulatory Requirements
- · Section 4: Site Information
- · Section 5: Facility Information
- Section 6: Supporting Documentation
- Section 7: Payment Information
- · Section 8: Authorization

Fields marked with an asterisk (*) are mandatory.

| 1. Applicant Information | | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| 1.1 Applicant Information | | | | | | | | |
| Applicant Type * | | | | | | | | |
| ✓ Corporation ☐ Individual | Federal Government Municipal Government | | | | | | | |
| ☐ Partnership ☐ Provincial Govern | ment Sole Proprietor | | | | | | | |
| Other (specify) | | | | | | | | |
| Applicant Name (Legal name of individual or organised Seaside Waterfronts Inc. | nization as evidenced by legal documents) * | | | | | | | |
| Select if Business Name same as Applicant Na | ame | | | | | | | |
| Business Name * Seaside Waterfronts Inc. | | | | | | | | |
| Business Number * 2134355 | Business Website Address | | | | | | | |
| Primary North American Industry Classification Sy 531390 | /stem (NAICS) Code * | | | | | | | |
| Other NAICS Code | | | | | | | | |
| Separate list attached? ☐ Yes ☑ No | | | | | | | | |
| Business Activity Description | | | | | | | | |
| Completion Status (1.1 Applicant Informati | Completion Status (1.1 Applicant Information) | | | | | | | |
| 1.2 Applicant Physical Address | | | | | | | | |
| Address Type? * | | | | | | | | |
| ✓ Civic Address | | | | | | | | |

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| Civ | /ic | Ad | dr | ess |
|-----|-----|----|----|-----|
| | | | | |

Unit Number Street Number * Street Name * Ontario Road

Survey Address

Enter Lot and Concession or Part and Reference Plan

ext.

Lot Concession Part Reference Plan

Municipality/Unorganized Township *

Mitchell

Province/State *

Ontario

Country *

Canada

Postal/Zip Code *

NoK 1N0

Telephone Number *

Fax Number

Mobile Number

Email Address *

howard@culliganrealestate.ca

519-348-4706 **Geo Reference**

| Description of location | Map Datum | Zone | Accuracy Estimate | Geo- Referencing Method | UTM Easting | UTM Northing |
|--|-----------|------|----------------------|-------------------------------|-------------|--------------|
| Southwest corner of property | NAD27 | 17 | +/- 10m | Google Earth | 484,051.22 | 4,812,743.33 |
| Physical location of front door or main entrance | NAD27 | 17 | +/- 10m | Google Earth | 484,067.49 | 4,812,755.46 |

/

Completion Status (1.2 Applicant Physical Address)

1.3 Applicant Mailing Address

✓ Select if same as Physical Address

Unit Number Street Number * Street Name * Ontario Road

Delivery Designator Delivery Identifier Postal Station

Municipality/Unorganized Township * County/District Mitchell Province/State * Postal/Zip Code * Country * **N0K 1N0** Ontario Canada Telephone Number * Fax Number Mobile Number Email Address * 519-272-5413 howard@culliganrealestate.ca ext.

Completion Status (1.3 Applicant Mailing Address)

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| 2. Project Information | | | | | | | |
|--|---|--|--|--|--|--|--|
| 2.1 Project Name and Description | | | | | | | |
| Project Name * Westerwater Treatment System Seeside Development | | | | | | | |
| Wastewater Treatment System - Seaside Development Project Description Executive Summary * | | | | | | | |
| MTE Consultants Inc. (MTE) was retained by Seaside Wa wastewater treatment plant (WWTP) for the proposed dev Concession 14, Aldborough Ward, in the Municipality of W | elopment located in Port Glasgow on Part Lot 6, | | | | | | |
| Seaside Waterfronts Inc. is proposing a Residential-Commercial Development, in approximately 24 hectares of land. The proposed development will include a combination of 343 residential units (single detached, townhomes and apartment units), and commercial areas. The entire development will be constructed in three separate phases. The WWTP will be required to treat domestic sewage generated from the residential and commercial units proposed for the development. Treated effluent will be discharged onto the constructed wetland, which will indirectly discharge to Sixteen Mile Creek. The proposed WWTP to service the proposed development will be a Newterra Membrane Bioreactor (MBR) designed for an average flow of 325 m3/day, and flow equalization ahead of the treatment works. The complete wastewater treatment system will be installed within three separate phases, coinciding with the phasing of the proposed development. | | | | | | | |
| Supplemental Application Information (select information button | for an action of information for their field) * | | | | | | |
| ✓ Completion Status (2.1 Project Name and Description) | | | | | | | |
| | | | | | | | |
| 2.2 Application Type | | | | | | | |
| Type * | | | | | | | |
| New ECA | Amendment to existing ECA | | | | | | |
| Revocation of existing ECA | Administrative amendment to existing ECA | | | | | | |
| Application for renewal of limited operational flexibility Consolidation of existing ECAs | | | | | | | |
| Is this application for the addition of a new project type to the sit management systems or a new sewage facility type? Yes No | e or a new municipal waste category/class code to the waste | | | | | | |
| Is this application for Transfer of Review? * | | | | | | | |
| ☐ Yes ✓ No | | | | | | | |

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| / | (|
|---|---|
| | |

Completion Status (2.2 Application Type)

2.3 Project Type

| Project Type (S | Limited Operational Flexibility? | Pilot Project? | | |
|---|--|-------------------------------|--------------------|--|
| Air - Stationary | | | | |
| Air - Mobile | | | | |
| Noise | | | | |
| ☐ Vibration | | | | |
| Waste Disposal Site - Landfill site | | N/A | | |
| Waste Disposal Site - Transfer site | | | | |
| Waste Disposal Site - Processing site | | | | |
| Waste Disposal Site - Composting site | | N/A | | |
| Waste Disposal Site - Thermal Treatment | site | N/A | | |
| Sewage - Industrial | | | | |
| Sewage - Municipal | | | | |
| Sewage - Private | | | | |
| Waste Management System – General Wa | aste Management System | N/A | | |
| ☐ Waste Management System - Hauled Sew | age (Septage) | N/A | | |
| Waste Management System – Soil Conditi | oner for transport to a site for Application on Land | N/A | | |
| Waste Management System - Mobile Was | te Processing | N/A | | |
| Cleanup of contaminated sites - Mobile | | N/A | | |
| Cleanup of contaminated sites - Site speci | N/A | | | |
| Completion Status (2.3 Project Tyles) 2.4 Approval Information Application initiated by * | pe) | | | |
| ✓ Applicant | S. 20.18 Order (attach copy) | | | |
| Condition of existing approval | ☐ Provincial Officer Order (attach copy | , /) | | |
| _ | | , | | |
| Inspection Report (attach copy) | Other (specify) | | | |
| Current Environmental Compliance Ap | provals that may be changed or amended b | y this application | : 🔽 N/A | |
| Environmental Com | oliance Approval Number | Date of Issuance (yyyy/mm/dd) | | |
| Compared list office and O | | | | |
| Separate list attached? | | | | |
| ☐ Yes ✓ No | | | | |
| Proposed Environmental Compliance | Approvals related to this project: V/A | | | |
| Project Type | Ministry Reference Number (if applicable) | Have Submitted | Have not Submitted | |
| | | | | |
| Separate list attached? | | | | |

☐ Yes 🔽 No

Completion Status (2.4 Approval Information)

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2.5 Other Approval/Permits for Facility V/A

List all other instruments (approvals or permits) issued by the Ministry of the Environment and Climate Change or applied for under the *Environmental Protection Act*, *Environmental Assessment Act*, *Ontario Water Resources Act* and *Safe Drinking Water Act*, *2002* and any Environmental Activity and Sector Registrations that are relevant to this application.

| Instrument Type Ins | | | | nt Numbe | er/ Applicat | Approval or Application Date (yyyy/mm/dd) | | | | |
|--|---------------------------------|-------------------------------|------------------------|------------------|--------------|---|---------------------------|-------------------------------|------------------------------|--|
| Separate list attach | ned? | | | | | | | | | |
| List all other instrur application. | ments (approvals | or permi | ts) issued b | y an age | ency, muni | cipality or | another ministr | y that | are relevant to this | |
| Issuing Agency Approva | | | | al or Pern | nit Name | , | Approval or Per Number | rmit Issued Date (yyyy/mm/dd) | | |
| ☐ Yes ✓ No | Separate list attached? Yes Vo | | | | | | | | | |
| Completion | Status (2.5 Other | r Approv | al/Permits f | for Facilit | y) | | | | | |
| 2.6 Technical Con | tacts | | | | | | | | | |
| Technical Contact | t 1 | | | | | | | | | |
| Area of Responsibi | lity (Select all that | t apply) | * | | | | | | | |
| Air Noise/ | /ibration ☑ Se | wage | Waste | | | | | | | |
| Name of Technical | Contact | | | | | | | | | |
| Last Name * | Contact | | | | First Nam | ıe * | | | | |
| Romero | | | | Nick | | | | | | |
| Company * | | | | | | | | | | |
| MTE Consultants | | | | | | | | | | |
| Address Informat | ion | | | | | | | | | |
| Select if same a | as Applicant Mailir | ng Addre | ess | | | | | | | |
| Civic Address | | | | | | | | | | |
| Unit Number | Street Number * 123 | | et Name * George St | reet | | | | | | |
| Delivery Designator Delivery Identi | | | | ier | | | Postal Station | | | |
| Municipality/Unorganized Township * London | | | | County/District | | | | | | |
| Province/State * Ontario | | | | Country * Canada | | | | | Postal/Zip Code * N6A 3A1 | |
| Telephone Number | nber | Mobile Number Email Address * | | | | | | | | |

1

Completion Status (2.6 Technical Contacts)

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3. Regulatory Requirements 3.1 Environmental Bill of Rights (EBR) Requirements Is this a proposal for a prescribed instrument under the EBR? * ✓ Yes No If yes, is this proposal exempted from the EBR requirements? * ☐ Yes 🗸 No If yes, please check one of the following (Please provide supporting information.) This proposal has been considered in a substantially equivalent process of public participation. (EBR, 1993, s.30.) Was the public participation process carried out in fulfillment of the requirements related to an approval under the Planning Act?

| | ☐ Yes ☐ No |
|---------------|--|
| | If yes, was the <i>Planning Act</i> approval related to a plan of subdivision? |
| | ☐ Yes ☐ No |
| | ☐ This proposal is for an emergency situation. (EBR, 1993, s. 29.) |
| | This proposal is for an amendment to or revocation of an existing Environmental Compliance Approval that is not environmentally significant. (EBR, 1993, s. 22 (3).) |
| | ☐ This proposal has been subject to or exempted from EAA Requirements or considered in a decision of a tribunal. (EBR, 1993, s. 32.) |
| / | Completion Status (3.1 Environmental Bill of Rights (EBR) Requirements) |
| 3.2 <i>En</i> | vironmental Assessment Act (EAA) Requirements |
| Is the p | proposed undertaking subject to the requirements of the EAA? * |
| ✓ Yes | s No |
| lf y | ves, please select one of the following: * |
| | The proposed undertaking has fulfilled the requirements of the EAA through the completion of a Class EA process |
| | Name of Class EA |
| | Schedule/Group/Category (if applicable) |
| | If applicable, please submit a copy of the proof of completion (for example, Notice of Completion). |
| | Was the undertaking subject of a Part II Order request(s)? |
| | ☐ Yes ☐ No |
| | If yes, please submit a copy of the Director's or Minister's decision letter. |
| | The proposed undertaking has fulfilled all of the requirements for the EAA through: |
| | Select all that apply: |
| | completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the EAA |
| | ompletion of an Environmental Screening Process pursuant to O. Reg. 116/01 of the EAA |
| | Was the undertaking subject of an elevation request(s)? |
| | ☐Yes ☐ No |
| | If yes, please submit a copy of the Director's decision letter. If an appeal was made to the Director's decision, |

please also submit a copy of the Minister's decision letter.

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| completion of an Environmental Screening Process pur | suant to O. Reg. 231/08 of the EAA | | |
|--|--------------------------------------|----------------|----|
| Was the undertaking subject of an objection(s)? | | | |
| ☐ Yes ☐ No | | | |
| If yes, please submit a copy of the Minister's decision. The proposed undertaking has fulfilled the requirements of Environmental Assessment. Please submit a copy of the signed Notice of Approval. | | individual | |
| Vas the undertaking exempted from the requirements of the EAA? ☐ Yes No | * | | |
| The proposed undertaking has fulfilled the requirements of the | EAA through an exemption provided ur | nder: | |
| Select one of the following | | | |
| Section | of Ontario Regulation No. | | or |
| Declaration/Exemption Order Number | | | |
| If Regulation, Declaration Order or Exemption Order doe supporting documentation to explain why it applies to the Completion Status (3.2 <i>Environmental Assessment Act</i> (EA | is facility | please provide | |
| 3.3 Consultation/Notification | | | |
| ndigenous Consultation: | | | |
| s the proposed project/activity on Crown land or does/would it alte | r access to Crown land? * | ☐ Yes 🗸 No | |
| s the proposed project/activity in an open or forested area where bould occur? * | unting, trapping or plant gathering | ☐ Yes 🗾 No | |
| Ooes the proposed project/activity involve the clearing of forested I | and? * | ☐ Yes 🔽 No | |
| Could the proposed project/activity impact a water body (e.g., direct vater body? * | t discharge) or alter access to a | ☐ Yes 🗸 No | |
| Could the proposed project/activity impact cultural heritage or archinem? * | aeological resources, or access to | ☐ Yes ✓ No | |
| s the proposed project/activity adjacent or close to a First Nation F | deserve? * | ☐ Yes 🔽 No | |
| s the applicant aware of any concerns from Indigenous communition | es about this proposed | ☐ Yes 🗾 No | |
| Vere there conditions placed, or direction provided, in another (or consultation in relation to this project/activity? * | orevious) permit or approval for | ☐ Yes ✓ No | |
| Based on the online Guide to Applying for an Environmental Comp by the ministry or another agency, are Indigenous consultation acti | | Yes V No | |

If Yes to the question above, please describe the consultation/notification activities undertaken for this application or as part of another process (e.g., EAA) in relation to the proposed project/activity, including a summary of the notification/consultation, First Nation and Métis communities contacted, key issues raised and how they were addressed, any changes to the project as a result of these activities, and any planned consultation/notification activities in the future.

application process? *

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Please attach supporting documents (e.g., record of consultation, delegation letter and/or direction provided by the Crown, materials provided to communities, meeting notes and agendas, correspondence with communities as appropriate).

If the applicant has determined that consultation with First Nation and Métis communities is not likely required for the proposed project/activity, please provide a rationale why: *

As per the Class EA, consultation with First Nations was completed (under Section 6.2 First Nations/Aboriginal

| Development Canada (AANDC) for guidance regarding Aboriginal Communities with potential interest in the Seaside project and the environmental assessment planning of stormwater and wastewater servicing. |
|--|
| Other Consultation/Notification: |
| Has the applicant had a ministry pre-application consultation in relation to the proposed project? * |
| ✓ Yes □ No |
| If this application is for a waste disposal site, have the neighbour notification requirements been completed? |
| Yes No |
| If yes, please attach a Public Consultation/Notification Report that includes the notice and list of recipients. |
| If no, please select the reason for not undertaking neighbour notification: |
| Application is for an administrative amendment |
| ☐ The proposal was subject to public consultation through an Environmental Assessment process |
| other , please explain |
| Are there any other consultation/notification activities that have been undertaken to fulfill requirements by other legislation or through voluntary efforts? * |
| Yes V No |
| If yes, please: |
| describe the consultation/notification activities below; and |
| attach documents describing each of these consultation\notification activities, any changes to the project as a result of these activities and any planned consultation/notification activities in the future. |
| |
| |

Completion Status (3.3 Consultation/Notification)

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| 4. Site Information | n | | | | | | | | | |
|---|---|-------------------|------------|------|-------------------|--------------|---------|-----------|----------------|-----------------|
| 4.1 Site Address or | Storage L | ocation | | | | | | | | |
| Will the vehicles or ed | Will the vehicles or equipment be stored at more than one location? | | | | | | | | | |
| ☐ Yes ☐ No | | | | | | | | | | |
| (If yes, please enter all vehicle or equipment storage locations below and attach separate list, as necessary.) | | | | | | | | | | |
| Select if same as | Applicant F | Physical Addre | ss | | | | | | | |
| Address Type? * | | | | | | | | | | |
| • | Survey A | ddress | | | | | | | | |
| Primary Civic Addre | ss | | | | | | | | | |
| | Street Num | ber Street | Name | | | | | | | |
| | | | | | | | | | | |
| Additional Civic Add | dresses | | | | | | | | | |
| Unit Number S | Street Num | ber Street | Name | | | | | | | |
| | 10 | | | | | | | | | |
| Separate list attached | 1? | | | | | | | | | |
| Yes No | | | | | | | | | | |
| Primary Survey Add | ress | | | | | | | | | |
| Enter Lot and Conces | | | | | | | | | | |
| Lot * | Conces | ssion * | Part | | | | Refere | ence Plan | | |
| | | | | | | | | | | |
| Additional Survey A | | | | | | | | | | |
| Enter Lot and Conces | | | | | | ı | D - f | Di | | |
| Lot | Conces | ssion | Part | | | | Referen | ce Plan | | |
| | | | | | | | | | | |
| Separate list attached | l? | | | | | | | | | |
| ☐ Yes 🗸 No | | | | | | | | | | |
| Municipality/Unorgani | zed Towns | ship * | | Co | ounty/District | | | | | |
| Municipality of Wes | t Elgin | | | | | | | | | |
| Province/State * Ontario | | | | l | ountry * anada | | | | Postal N0K1 | /Zip Code * |
| Non-address Informat | tion (includ | les any additio | nal inform | | | hysical loca | ntion) | | NOKI | INU |
| Tron address informati | aon (moide | ioo arry addition | | atio | into olamy the pi | nyolodi looc | 111011) | | | |
| Geo Reference (requ | uired) | | | | | | | | | |
| Select if same as | • | Physical Geo R | eference | | | | | | | |
| | | • | Zone ' | * | Accuracy | Geo-Refe | rencing | | octina * | LITM Northing * |
| Description of loc | Jauon | Map Datum * | Zone | | Estimate * | Metho | od * | UTM Ea | isung | UTM Northing * |
| Couthwest somer of n | roporti | NADOZ | 147 | | 1/ 10m | Coogle E | orth | 1403 | 1E 10 | 1 706 715 02 |

| Description of location | Map Datum * | Zone * | Accuracy Estimate * | Geo-Referencing Method * | UTM Easting * | UTM Northing * |
|--|-------------|--------|------------------------|-----------------------------|---------------|----------------|
| Southwest corner of property | NAD27 | 17 | +/- 10m | Google Earth | 449,345.40 | 4,706,715.83 |
| Physical location of front door or main entrance | NAD27 | 17 | +/- 10m | Google Earth | 449,449.75 | 4,706,161.49 |

✓ Completion Status (4.1 Site Address or Storage Location)

4.2 Site or Storage Location Information

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Site Name * Seaside Waterfronts Inc. Development Days and Hours of Operation * Ministry of the Environment and Climate Change District Office * **London District Office** 24 hours, 7 days a week Is the site (property) that is the subject of this application owned by the applicant? * Yes No If no, please include the owner's name, address and a signed document indicating that the applicant has the authority to install and operate the proposed activity, or store vehicles or equipment on the land. Is the applicant the operating authority of the site that is the subject of this application? * ✓ Yes No If no, please include the operating authority name, address and phone number. Is the site located in an area of development control as defined by the Niagara Escarpment Planning and Development Act (NEPDA)? * Yes 🗸 No If yes, please attach a copy of the NEPDA permit for proposed activity. Is the site within an area covered by the Oak Ridges Moraine Conservation Plan? * Yes V No If yes, please attach proof of municipal planning approval for the proposed activity/work (for example, zoning by-law, letter from municipality, etc.). Completion Status (4.2 Site or Storage Location Information) 4.3 Site Zoning and Classification V N/A **Current Land Use** Current Zoning (Please attach zoning map, if available.) Official Plan Designation Adjacent Land Use (select all that apply) Industrial Agricultural Commercial Recreational Residential Adjacent Land Zoning Does the current zoning permit the proposed activity? ☐ Yes ☐ No Does the applicant have correspondence from the municipality to confirm that the current zoning of the property permits the proposed use? Yes No If yes, please attach correspondence from the municipality. Does the official plan designation support the proposed activity?

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Yes No N/A

Completion Status (4.3 Site Zoning and Classification)

| 4.4 Point of Entry into Ontario N/A (for waste management system vehicles that are stored at an address outside of Ontario) | | | | | | | | |
|--|--|-------------------------------------|--|--|--|--|--|--|
| City in closest proximity to the point of entry | | | | | | | | |
| Description of Point of Entry | | | | | | | | |
| ✓ Completion Status (4.4 Point of | Entry into Ontario) | | | | | | | |
| 4.5 Source Protection/Drinking Wate | r Threats (sewage or waste disposal site applica | tions only) | | | | | | |
| Check the source protection area(s) where the activity is/will be located * | | | | | | | | |
| Ausable Bayfield | Cataraqui Region | Catfish Creek | | | | | | |
| Central Lake Ontario | Credit Valley | ☐ Crowe Valley | | | | | | |
| Essex | Ganaraska | Grand River | | | | | | |
| Grey Sauble | Halton | ☐ Hamilton | | | | | | |
| ☐ Kawartha-Haliburton | ☐ Kettle Creek | Long Point | | | | | | |
| Lakehead | Lake Simcoe and Couchiching/Black River | Lower Trent | | | | | | |
| ✓ Lower Thames Valley | ☐ Maitland Valley | Mattagami | | | | | | |
| ☐ Mississippi Valley | ☐ Niagara | ☐ North Bay Mattawa | | | | | | |
| ☐ Northern Bruce Peninsula | ☐ Nottawasaga Valley | ☐ Rideau Valley | | | | | | |
| Raisin Region | South Nation | Saugeen Valley | | | | | | |
| Sault Ste. Marie | Severn Sound | Sudbury | | | | | | |
| St. Clair Region | ☐ Toronto and Region | Otonabee-Peterborough | | | | | | |
| Outside a source protection area | Quinte | Upper Thames River | | | | | | |
| Is the proposed activity located or plant protection plan under the <i>Clean Water</i> . Yes No | ned to be located in a vulnerable area identified ir Act, 2006? * | n a local assessment report source | | | | | | |
| If yes, what is/are the vulnerable are | ea(s)/zone(s)? | | | | | | | |
| ☐ Wellhead Protection Areas | Surface Water Intake Protection Zones | ighly Vulnerable Aquifers | | | | | | |
| Significant Groundwater Recha | rge Areas | | | | | | | |
| protection area? * | d as a significant drinking water threat in the asse | essment report for the local source | | | | | | |
| Yes No | Donto di co (Deiolio e Modos Thomas | | | | | | | |
| Completion Status (4.5 Source | Protection/Drinking Water Threats) | | | | | | | |
| 4.6 Receiver of Effluent Discharge (solutermediate Receiver Name * Sixteen Mile Creek Watershed Name * | sewage applications only) | | | | | | | |
| Lower Thames River | | | | | | | | |
| Type of Receiver * | | | | | | | | |
| ✓ Surface Water ☐ Groundwater ☐ Other (specify) | | | | | | | | |

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| Has the facility received local Conservation Authority clearance? (for stormwater management facility discharging to the natural environment) * | | | | | | | |
|---|---|-----------------|--|--|--|--|--|
| ✓ Yes ☐ No | | | | | | | |
| If yes, please include a copy of the Cor | nservation Authority clearance. | | | | | | |
| Final Receivers N/A | | | | | | | |
| Will the proposed activity discharge sewag | e to any of the following critical receivers? | | | | | | |
| Lake Simcoe | Rideau River | Detroit River | | | | | |
| Great Lakes | Rouge River | ☐ Bay of Quinte | | | | | |
| Other (specify) * N/A | | | | | | | |
| Is the receiver a Policy 2 receiver? * | | | | | | | |
| ☐ Yes 🗸 No | | | | | | | |
| Does the applicant have a Policy 2 deviation approval from the directors? | | | | | | | |
| ☐ Yes ☐ No | | | | | | | |
| If yes, please attach a copy of the Director's approval. | | | | | | | |
| ✓ Completion Status (4.6 Receiver of Effluent Discharge) | | | | | | | |

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| Select Type of Equipment | Number of Pieces of Equipment |
|--|----------------------------------|
| Combustion equipment that uses natural gas, propane, no. 2 oil, landfill gas or sewage treatment gas for fuel for the purpose of providing comfort heating or emergency power, producing hot water or steam, or heating material in a system that does not discharge to the atmosphere (Total Heat input of all units: ≤ 50,000,000 kJ/hr) | N/A |
| Storage tanks | N/A |
| Welding operations that use a maximum of 10 kilograms of welding rod per hour | N/A |
| Combustion equipment that uses waste-derived fuel for the purpose of providing comfort heating, burning ≤ 15 litres per hour | |
| Heat cleaning ovens used for parts cleaning and associated parts washers or degreasing equipment, other than solvent degreasing equipment | |
| Cooling towers | |
| Equipment used to control emissions of contaminants, other than a fume incinerator | |
| Laboratory fume hoods | |
| Paint spray booths and associated equipment that have a design capacity of up to 8 litres per hour of paint | |
| Grain dryers | |
| Any other equipment not listed above with a flow rate of less than or equal to 1.5 m³/second | |
| Any other equipment not listed above with a flow rate of greater than 1.5 m³/second | |
| Equipment that is subject to an Environmental Compliance Approval, and from which there is no proposed increase in the discharge of any contaminant that was previously reviewed by the Director. | N/A |
| Completion Status (5.1.1 Summary of Equipment that Discharges Contaminants to the Air) | |
| 5.1.2 Emission Summary and Dispersion Modelling (ESDM) Report | |
| ls the review of an existing, approved ESDM required as part of this proposed application? | |
| ☐ Yes ☐ No | |
| If yes, identify the number of emission sources described in the existing ESDM Report that emit with the sources forming the subject of the application (if none, enter zero). | contaminants in common |
| | |

5.1.3 O. Reg. 419/05 Requirements

Yes No

for an existing Environmental Compliance Approval?

Completion Status (5.1.2 ESDM Report)

5. Facility Information

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| which of the following sections of O. Reg. 419/05 applies to the | e facility? |
|---|---|
| s.19 (Schedule 2) | |
| s. 20 (Schedule 3) | |
| Does not apply. Please indicate reason | |
| Has an instrument under O. Reg. 419/05 been issued? | |
| ☐ Yes ☐ No | |
| | orders or approvals) has (have) been issued? (select all that apply) |
| ss. 4(2) Adjacent Properties | ss. 7(1) Specified Dispersion Models |
| ss. 8(2) Negligible Sources | ss. 10(2) Operating Conditions |
| ss. 11(2) Refined Emission Rates | ss. 13.1 Value of Dispersion Modeling Parameters |
| ss. 13(1) Meteorological Data | ss. 14(6) Area of Modelling Coverage |
| ss. 20(4) Speed-up Request | ss. 20(5) Speed-up Order |
| s. 35 Site-specific Standard | ss. 35(14) Site-specific Standard Order |
| ss. 39(3) Technical Standard Registration (Industry Standard) | ss. 39(4) Technical Standard Registration (Equipment Standard) |
| Other (list all that have been issued) | |
| Is an instrument under O. Reg. 419/05 being requested as part | t of this application? |
| ☐ Yes ☐ No | |
| If yes, what type(s) of notice, order or approval is (are) being | ng requested? |
| ss. 7(1) Specified Dispersion Models | ss. 8(2) Negligible Sources |
| ss. 10(2) Operating Conditions | ss. 11(2) Refined Emission Rates |
| ss. 13(1) Meteorological Data | ss. 14(6) Area of Modelling Coverage |
| ss. 20(4) Speed-up Request | s. 32 Request for a Site-specific Standard Order |
| ss. 39(1)(a) Application for Technical Standard Registration (Industry Standard) | ss. 39(1)(b) Application for Technical Standard Registration (Equipment Standard) |
| Other (list all that have been issued) | |
| Please attach the form(s) requesting the notice(s) and/or order | (s) and any additional supporting information. |
| Has an s. 30 Upper Risk Threshold (Schedule 6) been exceede ☐ Yes ☐ No | ed? |
| If yes, please include additional supporting information. | |
| Is the facility located in a multi-tenant building? | |
| ☐ Yes ☐ No | |
| If yes, additional information may be requested. | |
| publication titled "Summary of Standards and Guidelines to suphave they been screened out based on the publication titled " Ontario Regulation 419: Air Pollution - Local Air Quality"? | resented in the Ministry of the Environment and Climate Change pport Ontario Regulation 419: Air Pollution- Local Air Quality' or Jurisdictional Screening Level (JSL) List, A Screening Tool for |
| | · · · · · · · · · · · · · · · · · · · |

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| Completion Status (5.1.3 O. Reg. 419/05 Requirements) | |
|---|----|
| Completion Status (5.1 Air) | |
| Note** - If the application does not have noise emissions please proceed to Section 5.3 | |
| 5.2.1 Noise Assessment Information | |
| Has an Acoustic Assessment Report (AAR) been completed in relation to the proposed project/activity? | |
| □Yes □No | |
| If yes, please attach the Acoustic Assessment Report | |
| Does the AAR show that applicable limits are met? | |
| ☐ Yes ☐ No | |
| If no, please attach the Acoustic Assessment Report including the Noise Abatement Action Plan | |
| f no, is the application eligible for Primary or Secondary Noise Screening? | |
| □Yes □No | |
| Note that if the proposed activity is not eligible for either of the screenings, an AAR must be submitted. | |
| If yes, is the proposed activity eligible for the Primary Noise Screening? | |
| ☐ Yes ☐ No | |
| If yes, is the actual separation distance between the facility and the nearest noise sensitive point of reception (POI greater than the minimum required separation distance calculated from the Primary Noise Screening? — Yes — No | ₹) |
| If yes, please attach the Primary Noise Screening form and supporting documentation. Note that if the Primary Noise Screening is not successful then the applicant may attempt to proceed with the Secondary Noise Screening. | |
| If no, does the Secondary Noise Screening Form show that the applicable sound level limits are met? | |
| ☐ Yes ☐ No | |
| If yes, please attach the Secondary Noise Screening Form and supporting documentation. Note that if meeting the applicable sound level limits cannot be demonstrated, then an AAR must be submitted | • |

✓ Completion Status (5.2.1 Noise Assessment)

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5.2.2 Equipment Subject to Noise Review

| | | Description | | Number of Pieces of Equipment |
|----------|---|--|---------------------|----------------------------------|
| | Arc Furnaces | | | |
| | Asphalt Plants | | | |
| | Blow-down Devices | | | |
| | Co-Generation Facilities | | | |
| | Crushing Operations | | | |
| | Flares | | | |
| | Gas Turbines | | | |
| | Pressure Blowers or Large Induced Dr 1.25 kilopascals) | aft Fans (flow rate > 47 m³/second or sta | tic pressure > | |
| | • • | hat has not previously been reviewed by nvironmental Compliance Approval with | | |
| | | hat is identical to equipment for which a not in connection with an application for an ne facility | | |
| 5 3 50 | Completion Status (5.2.2 Equipment S Completion Status (5.2 Noise) wage Works Information | ubject to Noise Review) | | |
| | | wage Works please proceed to Section 5 | . 1 | |
| | Facility Type - Sewage Works | wage works please proceed to occurre | | |
| | the type of facility that is the subject of | the application (select all that apply). * | | |
| | wage Treatment Plant (STP) | ☐ Stormwater Management Facility | | |
| For the | e following, the applicant must complete | and attach the relevant sections of the p | ipe data form: | |
| ☐ Sto | orm Sewers | Ditches | Combined Se | wers |
| ☐ For | ce mains | Sanitary Sewers | ☐ Pumping Stati | on |
| Se | ewage Treatment Plant Details | | | |
| | Primary | Secondary | Tertiary | |
| | Receives septage | Constructed/Engineered Wetlands | ✓ On-site syster | n |
| | Lagoons (check all that apply below) | | | |
| | Septage Municipal | Other (specify) | | |
| Fa | cility Type * | | | |
| ✓ | Municipal or private facility | | | |
| | Category: * ✓ New ☐ 1 ☐ 2 ☐ | 3 🔲 4 | | |
| | Please indicate the maximum design | capacity of the municipal or private sewa | ge treatment plant: | * |
| | $ ✓ ≤ 4,500 \text{ m}^3/\text{day} $ $ \bigcirc > 4,500 \text{ m}^3/\text{c} $ | lay | | |
| | Facility for the treatment of leachate | | | |
| | Category: New 1 2 | 3 🔲 4 | | |

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| Facility for the treatment of industrial process wastewater |
|---|
| Category: New 1 2 3 4 |
| Facility for the disposal of non-contact cooling water |
| ☐ Subsurface disposal |
| Please indicate the design capacity of the subsurface disposal: |
| $\square \le 15 \text{m}^3/\text{day} \square > 15 \text{ m}^3/\text{day} \text{ and } < 50 \text{ m}^3/\text{day} \square > 50 \text{ m}^3/\text{day}$ |
| Stormwater Management Facility Details |
| Category: New 1 2 3 4 |
| Pond Type |
| |
| What is the drainage area (in hectares) associated with the proposed activity? |
| Does the applicant own all, or part of the drainage area? |
| Applicant owns all of the drainage area |
| Applicant owns part of the drainage area |
| Applicant does not own the drainage area |
| For the drainage area land that the applicant does not own, does the applicant have an agreement with the owner(s) of |
| the drainage area? ☐ Yes ☐ No |
| What is the predominant type of land use in the drainage area? |
| Rural or Agricultural Commercial or Industrial Residential |
| |
| Is a Hydrogeological Assessment required? * ☐ Yes ✓ No |
| (If yes, please attach the hydrogeological assessment.) |
| |
| Is a review of effluent criteria assessment for stormwater management, cooling water or soil remediation facilities required? * |
| Yes ✓ No (If yes, please attach the final effluent criteria accepted by the Regional Office of the Ministry.) |
| |
| Is a review of effluent criteria assessment for municipal or private sewage, industrial process wastewater or leachate treatment plant required? * |
| ☐ Yes ✓ No |
| (If yes, please attach the final effluent criteria accepted by the Regional Office of the Ministry.) |
| Note: The Hydrogeological Assessment, effluent criteria, and surface water assessment must be discussed and prepared |
| with the Ministry's regional technical support section during a pre-application meeting(s) and consultation(s) with the Ministry |
| A proof of concurrence from technical support must be included as part of the ECA application package. |
| ✓ Completion Status (5.3.1 Facility Type - Sewage Works) |
| 5.3.2 Servicing |
| The works will provide sewage servicing for (select all that apply): * |
| ✓ Residential |
| Residential Type * |
| ✓ Subdivision ☐ Condominium ☐ Institutional |
| Other (specify) |

Is there a Municipal Responsibility Agreement in place? *

| ☐ Yes ✓ No ☐ N/A | | | | |
|--|---|--|----------|-------------------------|
| | Municipal Responsibility Agreement.) | | | |
| Commercial | | | | |
| Commercial Type | | | | |
| ☐ Hotel, Motel, Inn | Campground, Park | Rental Cabin | S | |
| Resort | ☐ Shopping Malls | Restaurant | | |
| ☐ Highway Service Station/Gas Bars | Other (specify) | | | |
| ☐ Industrial | | | | |
| Describe | | | | |
| ✓ Completion Status (5.3.2 Servicing) | | | | |
| 5.3.3 Sewage Servicing for Waste Dispos | sal/Landfill Sites | | | |
| Does/Will the sewage treatment facility rece | eive waste disposal/landfill site leachate? * | | | |
| ☐ Yes ✓ No | | | | |
| If yes, please identify the site(s) below. | | | | |
| Name of Site Contr | ibuting Leachate | Environmen Compliance App Number | | Volume of Leachate (m³) |
| 1. | | | | |
| ✓ Completion Status (5.3.3 Sewage S | ervicing for Waste Disposal/Landfill Sites) | | <u>'</u> | |
| ✓ Completion Status (5.3 Sewage Wo | rks) | | | |
| 5.4 Waste Disposal Site | | | | |
| Note** - If the application is not for a waste | disposal or processing site please proceed | d to Section 5.5 | | |
| 5.4.1 Facility Description - Waste Dispos | | | or activ | vity at this site) |
| Service Area | · | • | | f Site (hectares) |
| Monitoring (select all that apply) | | | | |
| Groundwater | Surface Water | Landfill Gas | | |
| Leachate | None | | | |
| Other (specify) | | | | |
| Type(s) of waste to be accepted at this site | (select all that apply) | | | |
| Subject: | Non-subject: | | | |
| ☐ Hazardous Waste | Municipal (non-hazardous) | | | |
| Liquid Industrial Waste | Other Liquid Waste | | | |
| Municipal waste categories to be accepted | at this site (select all that apply) | | | |
| All Categories | Contaminated Soil | ☐ Domestic Sc | ources | |
| ☐ IC & I Sources | Source Separated Organics | Tires | | |
| Leaf and Yard Waste | ☐ Wood Waste | Blue Box Ma | aterials | |
| Other (specify) | | | | |

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| Other liquid waste ca | iteg | ories to be accept | ed at | this site (select a | all that a | pply) | | | |
|--|---|----------------------|--------|--------------------------|------------|----------------|-----------------|--------|--------------|
| Processed Organ | ics | | | | ☐ Hau | led Sewage | | | |
| ☐ Waste from Food Processing/Preparation Operations ☐ Other (specify) | | | | | | | | | |
| Hazardous Waste / | Liq | uid Industrial Was | ste | | | | | | |
| Class Code | | Class Cod | le | Class | Code | C | lass Code | | Class Code |
| | | | | | | | | | |
| ✓ Completion Status (5.4.1 Facility Description - Waste Disposal Site) | | | | | | | | | |
| 5.4.2 Waste Transfe composting take(s) p | | | sting | j - Complete this | s informa | ation if waste | transfer and/or | proces | ssing and/or |
| Waste Type to be Tra | ansf | erred or Processe | d | | | | | | |
| Hazardous waste | or I | iquid industrial was | ste | | | | | | |
| Design Capacity | | | | | | | | | |
| ≤ 100 tonnes | per | day | 00 to | nnes per day | | | | | |
| ☐ Waste other than | haz | zardous waste and | liquid | l industrial waste |) | | | | |
| Design Capacity | | | | | | | | | |
| ≤ 100 tonnes | per | day | 00 to | nnes per day | | | | | |
| Change to Operation | S | | | | | | | | |
| ☐ No Change Propo | osec | d | | | | | | | |
| Change does not | req | uire fundamental c | desigr | n review | | | | | |
| Change requires | func | damental design re | view | | | | | | |
| Liquid Waste | | | | | | | | | |
| Maximum Storage Ca | ара | city (m³) | | | | | | | |
| Hazardous | Liq | uid Industrial | Othe | r Liquid Waste | | | | | |
| Maximum Residual fo | or F | inal Disposal (m³) | | | | | | | |
| Hazardous | | | Liqui | d Industrial Was | te | | Other Liquid W | /aste | |
| Daily | An | nually | Daily | , | Annuall | у | Daily | | Annually |
| Solid Waste | | | | | | | | | |
| Maximum Storage Ca | apa | city (tonnes) | | | | | | | |
| Hazardous | No | on-Hazardous | | | | | | | |
| Maximum Residual | for | Final Disposal (to | onne | s) | | | | | |
| Hazardous | | | Non- | hazardous | | | | | |
| Daily | An | nually | Daily | , | Annuall | у | | | |
| | | | | | | | | | |
| Maximum Amount o | of W | aste to be Receiv | ved D | aily | | I | | | |
| Liquid (m³) | 1 | | | lone in the | | Solid (tonnes | s) | ا ا | |
| Hazardous | azardous Liquid Industrial Other Liquid Waste Hazardous Non-hazardous | | | | | | | | |

Completion Status (5.4.2 Waste Transfer/Processing/Composting)

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5.4.3 Thermal Treatment Facility - Complete this information if thermal treatment takes place at this facility Waste Type for Thermal Treatment Hazardous waste or liquid industrial waste **Design Capacity** ≤ 100 tonnes per day > 100 tonnes per day Waste other than hazardous waste and liquid industrial waste **Design Capacity** ≤ 100 tonnes per day > 100 tonnes per day Change to Operations No Change Proposed Change does not require fundamental design review Change requires fundamental design review **Liquid Waste** Maximum Storage Capacity (m³) Hazardous Liquid Industrial Other Liquid Waste Maximum Residual for Final Disposal (m3) Liquid Industrial Waste Other Liquid Waste Hazardous Annually Daily Daily Daily Annually Annually **Solid Waste** Maximum Storage Capacity (tonnes) Hazardous Non-Hazardous Maximum Residual for Final Disposal (tonnes) Non-hazardous Hazardous Daily Annually Daily Annually Maximum Amount of Waste to be Received Daily Liquid (m³) Solid (tonnes) Hazardous Other Liquid Waste Hazardous Non-hazardous Liquid Industrial Maximum Daily Feed Rate (tonnes/m3) Non-hazardous Waste (tonnes) Hazardous Waste (tonnes) Liquid Industrial Waste (m³) Other Liquid Waste (m3) Completion Status (5.4.3 Thermal Treatment Facility) 5.4.4 Landfill Site - Complete this information if this facility operates as a landfill site Waste Types to be accepted at the Landfill Hazardous waste or liquid industrial waste **Design Capacity** $\leq 40,000 \text{ m}^3$ $> 40,000 \text{ m}^3 \le 3 \text{ million m}^3 > 3 \text{ million m}^3$

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Waste is only uncontaminated tree stumps, leaves, branches, concrete and rocks

| Desig | n Capacity | | | | | | |
|------------|---------------------------------------|--|--|---------------------|------------------|-------------------|----------------|
| | 40,000 m³ | > 40,00 | $00 \text{ m}^3 \le 3 \text{ million}$ | m³ | on m³ | | |
| | e other than hazard ete and rocks. | ous waste and liqui | d industrial wast | e, other than unco | ontaminated tre | e stumps, leave | es, branches, |
| Desig | n Capacity | | | | | | |
| | 40,000 m³ | > 40,00 | $00 \text{ m}^3 \le 3 \text{ million}$ | m³ | on m³ | | |
| Change to | o Operations | | | | | | |
| ☐ No Ch | nange Proposed | | | | | | |
| Chang | ge does not require | fundamental desig | n review or hydro | ogeological asses | sment | | |
| Chang | ge requires fundam | ental design review | or hydrogeologi | cal assessment | | | |
| with th | ne Ministry's region | cal Assessment, effl al technical support om technical suppo | t section during a | a pre-application r | meeting(s) and | consultation(s) v | |
| Maximun | n Landfilling Capa | icity (m³) | | | | | |
| Hazardou | ıs Waste | Non-hazardous | s Waste | Liquid Industrial | Waste | Other Liquid V | Vaste |
| Maximun | n Amount of Wast | e to be Received | | | | | |
| Hazardou | ıs Waste (tonnes) | Non-hazardous | S Waste (tonnes) | Liquid Industrial | Waste (m³) | Other Liquid W | |
| Daily | Annually | Daily | Annually | Daily | Annually | Daily | Annually |
| Landfill I | nformation | | | | | | |
| | | Area to be Lan | dfilled (hectares) | Total Site Area i | ncluding Buffer | Area (hectares |) |
| Estimated | d Date of Closure (y | yyyy/mm/dd) | | Population Serv | ed | | |
| Control Ty | ypes (select all that | apply) | | | | | |
| Leach | ate Collected and ⁻ | Treated Off-site | | Leachate Co | llected and Tre | ated On-site | |
| Landfi | II Gas Collected an | d Flared | | Landfill Gas | Collected for Er | nergy Generatio | on |
| Other | (specify) | | | | | | |
| ✓ Co | ompletion Status (5 | 5.4.4 Landfill Site) | | | | | |
| ✓ Co | ompletion Status (5 | 5.4 Waste Disposal | Site) | | | | |
| 5.5 Wast | e Management Sy | stems (Except Mo | bile Waste Prod | cessing) | | | |
| Note**- If | the application is n | ot for a waste man | agement system | please proceed t | o Section 5.7. | | |
| 5.5.1 Flee | et List (all vehicles | and equipment to b | oe used in the op | eration of the Wa | ste Manageme | nt System) | |
| Year | Make | Model | Vehicle Identifi | cation Number (V | IN) License F | Plate Number | Province/State |
| | | | | | | | |
| Separate | list attached? | | | | | | |
| Yes | No | | | | | | |

5.5.2 Vehicle Information

Completion Status (5.5.1 Fleet List)

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| | used owned by the applica | ant? | | | | | | |
|---|--|---------------|----------------|-----------------------------------|------------------------|--|--|--|
| ☐ Yes ☐ No | | | | | | | | |
| If no, please include additional information about ownership arrangements for each vehicle not owned by the applicant. | | | | | | | | |
| Has a minimum of \$1,000,000.00 liability insurance been obtained for all vehicles for which it is required? | | | | | | | | |
| ☐ Yes ☐ No Describe any additional insurances that are held (for example, environmental_impairment_liability insurance). | | | | | | | | |
| Describe any additional in | surances that are held (to | r example, e | environmentai | impairment liability insura | ince). | | | |
| | | | | | | | | |
| Completion Status | (5.5.2 Vehicle Information | n) | | | | | | |
| 5.5.3 General Waste Mai | nagement System | | | | | | | |
| Type(s) of Waste to be Tr | ansported by the General | Waste Man | agement Syste | em (select all that apply) | | | | |
| Subject: | | | Non-subject | | | | | |
| ☐ Hazardous Waste | | | ☐ Municipa | l (non-hazardous) | | | | |
| Liquid Industrial Waste |) | | Other Liq | uid Waste | | | | |
| Non-subject Categories to | be Transported by the Ge | eneral Wast | e Managemen | t System (select all that ap | oply) | | | |
| ☐ Blue Box Materials | Blue Box Materials Domestic Sources | | | | | | | |
| Commercial | | | ☐ Non-Haz | ardous Solid Industrial | | | | |
| Leaf/Yard Waste | | | ☐ Wood Wa | aste | | | | |
| Spill Cleanup Material | | | Contamir | nated Soil | | | | |
| Tires | | | Asbestos | Waste in Bulk | | | | |
| ☐ Waste Wash Water | | | Grease T | rap Waste | | | | |
| ☐ Waste from Food Proc | essing/ Preparation Opera | ations | Dewatered | ed Catch Basin Clean-out I | V laterial | | | |
| Processed Organics (r | not for land application) | | Other (sp | pecify) | | | | |
| Subject Waste Categoric | es to be Transported by | the Genera | l Waste Mana | gement System | | | | |
| Hazardous Waste / Liqu | id Industrial Waste | | | | | | | |
| Class Code | Class Code | Clas | s Code | Class Code | Class Code | | | |
| | | | | 51852 5255 | | | | |
| Separate list attached? | | | | | | | | |
| Yes No | | | | | | | | |
| | rained in accordance with | O Reg 347 | and all pertin | ent environmental legislation | on | | | |
| | | _ | • | that waste transportation | | | | |
| | e public and the natural er | | | • | · | | | |
| · | oathological waste and PC ched and Financial Assura | • | | d 312) Operations Manual | and Driver Training | | | |
| General Waste Manager | nent System - Disposal S | Site Informa | ation | | | | | |
| What is the Final Destinat | ion of Waste to be Transp | orted by the | General Was | te Management System? (| select all that apply) | | | |
| ☐ A disposal site in Onta | rio approved by the Minist | try of the En | vironment and | Climate Change | | | | |
| Disposal sites outside of Ontario approved by another regulatory agency | | | | | | | | |

List the destination province(s)/state(s)

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| | Province/State | Province/State | Province/State | Province/State | | | | | | |
|----------|--|---|---|----------------------------------|--|--|--|--|--|--|
| | | | | | | | | | | |
| / | Completion Status (5.5.3 | 3 General Waste Management S | ystem) | | | | | | | |
| | | Management System (includes r lids) destined for land application | non-agricultural source material (n only) | NASM) that is waste and | | | | | | |
| | the applicant received reco nic waste (biosolids) or NA | | ration Committee (BUC) for land | application of processed | | | | | | |
| | Yes If yes, please provide a copy of the BUC recommendation. | | | | | | | | | |
| □ N | lo If no, please clarify | | | | | | | | | |
| Spre | eading equipment (land ap | plication only) | | | | | | | | |
| | Equipment Type | Make and Model | Desci | ription | | | | | | |
| - | | | | | | | | | | |
| Sepa | arate list attached? | | | | | | | | | |
| | es No | | | | | | | | | |
| Meth | nod of system operation (| land application only) | | | | | | | | |
| Estin | nated quantity to be handle | d on an annual basis (cubic metr | res/litres/tonnes) | | | | | | | |
| | | | | | | | | | | |
| Pleas | se describe the loading pro | cedures: | | | | | | | | |
| | 01 | | | | | | | | | |
| | | | | | | | | | | |
| Pleas | se describe the spreading r | nethods: | | | | | | | | |
| | | | | | | | | | | |
| Pleas | se describe the storage fac | ilities (tanks, lagoons, etc.): | | | | | | | | |
| | | | | | | | | | | |
| | 0 1111 1111 1 111 | 10 () 14 19 | 4' 0'' | | | | | | | |
| | ` | gement System - Land Applica | | tt (t !ldtld | | | | | | |
| | cation only) | vaste to be transported by the so | il conditioner waste managemen | : system? (must include for land | | | | | | |
| N | lon-agricultural land | Agricultural land | ☐ Both agricul | tural and non-agricultural land | | | | | | |
| / | Completion Status (5.5.4 | 4 Soil Conditioner Waste Manage | ement System) | | | | | | | |
| 555 | · | e) Waste Management System | , , , , | | | | | | | |
| | e(s) of hauled sewage (sept | | | | | | | | | |
| | ortable toilet waste | Septic tank waste | Holding tank | (wasta | | | | | | |
| | | Oeptic tank waste | | , waste | | | | | | |
| | Other (specify) | | | | | | | | | |
| Spie | Spreading equipment (land application only) Equipment Type | | | | | | | | | |
| | Equipment Type | Make and Model | Desci | ipuon | | | | | | |
| Sono | arate liet attached? | | | | | | | | | |
| | arate list attached? | | | | | | | | | |
| r | es 🔛 No | | | | | | | | | |

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Does this system include in-transit storage?

| Yes No | | |
|---|---|---|
| If yes: a) What is the duration of storage? Please | specify (Maximum period of in-transit storage sho | ould not exceed more than two |
| weeks): | | |
| | | |
| | | |
| b) Is the storage tank a prefabricated tank to Class 5 Sewage System under the Onta | with the capacity < 100,000 L, designed and cons rio Building Code or CAN/CSA B66-05? | structed in accordance with a |
| Yes No If no, please provide a cop | by of the design of the storage tank signed and da | ated by a professional engineer. |
| Ooes this system include in-transit processing? | | |
| ☐ Yes ☐ No | | |
| If yes: | | |
| a) Location of in-transit processing: | | |
| ☐ In Vehicle ☐ In-storage Tank | | |
| b) Describe the method of in-transit proces | sing: | |
| | | |
| | | |
| | | |
| Does this system use barge/boat to transport ha | (santana) | |
| Yes No | uica sewage (septage): | |
| If yes: | | |
| | y insurance been obtained for the barge/boat for | which it is required? |
| Yes No | y modration boot obtained for the barge, boat for | William R to roquirou. |
| | 10 horsepower (hp) or more, for which a commer | cial vessel license is required |
| • | y of the commercial vessel license. | |
| | plicant must include with the application the cons | ont of the landowner if the |
| | cial assurance estimate must be provided by app | |
| lauled Sewage (Septage) Waste Managemen | | |
| | mber(s) of all disposal site(s) approved by the Minewage in association with this waste managemen | |
| Instrument Type | Instrument Number | Approval or Application Date (yyyy/mm/dd) |
| | | |
| Completion Status (5.5.5 Hauled Sewage | e (Septage) Waste Management System) | |
| , | | |
| Completion Status (5.5 Waste Management | ent Systems (Except Mobile Waste Processing)) | |
| | | |

5.6 Waste Management System - Mobile Waste Processing

Note**: If the application is not for the use and operation of mobile waste processing equipment, proceed to Section 5.7

5.6.1 Mobile Waste Management System Process and Equipment Description

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| i ype(| s) of waste to be P | rocessed (select all th | at apply) | | | | | | |
|---|--|--------------------------|-------------------|--------------------|---------------|------------------|---------------|----------|--|
| Subject: | | | | ١ | Non-subject: | | | | |
| ☐ Ha | zardous Waste | | | | Municipal | (non-hazardou | ıs) | | |
| Liq | ıuid Industrial Wast | te | | | Other Liq | uid Waste | | | |
| Type of Waste to be Processed by the Unit(s) Number of Units | | | | | Financial As | surance (per u | nit) Fina | ancial . | Assurance Required |
| Non-h | azardous Solid Wa | ste | | | | \$5, | 000 | | |
| Hazar | dous Waste | | | | | \$20, | 000 | | |
| Liquid | Industrial Waste | | | | | \$20, | 000 | | |
| Other | Liquid Waste | | | | | \$20, | 000 | | |
| | le Types of Waste t Itegories Above | from | | | | \$20, | 000 | | |
| | | Total Financ | cial Assurance |) | | | | | |
| Munic | ipal (non-hazardou | ıs) Waste Categories to | be Processe | d (se | lect all that | apply) | | | |
| ☐ Co | ntaminated Soil at | Cleanup Site | Nood Waste | | | ☐ Co | nstructior | n and I | Demolition Waste |
| ☐ As | bestos Waste | | Tires | | | ☐ Do | mestic W | aste | |
| Otl | her (specify) | | | | | | | | |
| Other | Liquid Waste Cate | gories to be Processed | d (select all tha | at ap _l | oly) | | | | |
| ∐ На | uled Sewage | Waste from Foo | od Processing | /Prep | aration Ope | rations | Proce | essed | Organic |
| Otl | her (specify) | | | | | | | | |
| Hazar | dous / Liquid Indi | ustrial Waste Types to | o be Process | ed | | | | | |
| | Class Code | Class Code | CI | ass C | Code | Class C | ode | | Class Code |
| | | | | | | | | | |
| ~ | Completion Statu | s (5.6.1 Mobile Waste | Management | Syste | em Process | and Equipmen | t Descript | tion) | |
| 5.6.2 | Equipment Inform | nation - Please attach a | a separate list | if mo | ore space is | required. | | | |
| Equip | ment List | | | | | | | | |
| Unit No. | Unit Type | Process Description | Equipment 7 | ype | Make | Model | Seria Numb | | Equipment Capacity (including unit of measurement) |
| | | | | | | | | | |
| · · | ate list attached? | | | | | | | | |
| ∐ Ye: | s 🗌 No | | | | | | | | |
| / | Completion Statu | s (5.6.2 Equipment Info | ormation) | | | | | | |
| / | Completion Statu | s (5.6 Waste Manage | ment System | - Mol | oile Waste P | rocessing) | | | |
| 5.7 CI | eanup of Contam | inated Sites | | | | | | | |
| Note* | * - If the application | is not for a cleanup of | a contaminat | ed sit | te please pro | oceed to Section | n 6. | | |
| Туре | of Cleanup | | | | | | | | |
| | situ | ☐ Ex-situ | | Γ | Both | | | | |
| Conta | minated media to b | e treated: | | _ | | | | | |
| Gr | oundwater | ☐ Surface wa | ter | | Sediment | | | Soil | |
| _ | | | | | | | | | |

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| Waste Type | | | | | | |
|--------------------------|----------------------------------|-----------------------------|---------------|--|--|--|
| Subject: | | Non-subject: | | | | |
| Hazardous Waste | | ☐ Municipal (non-hazardous) | | | | |
| Liquid Industrial Waste | | Other Liquid Waste | | | | |
| Type of discharge | | | | | | |
| Air | Groundwater | Storm or sanitary | Surface water | | | |
| ☐ Noise | | | | | | |
| ✓ Completion Status (5.7 | 7 Cleanup of Contaminated Sites) | | | | | |

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6. Supporting Documentation and Technical Requirements

6.1 General

This is a list of supporting information to this application and is subject to the FIPPA and EBR.

| Attachment | Required, Optional or N/A | Atta | ached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
|---|---------------------------------|-------|---------|---|--------------|
| Proof of legal name | Required | ✓Yes | No | | |
| Enhanced EBR description | N/A | Yes | No | | |
| Provincial Officer Notice | N/A | Yes | No | | |
| Inspection Report | N/A | Yes | No | | |
| Detailed project and process description | Required | ✓Yes | □No | | |
| Pre-application Consultation Record | N/A | Yes | □No | | |
| Legal Survey(s) | Required | ✓ Yes | □No | | |
| Site Plan(s) | Required | ✓ Yes | □No | | |
| Scaled area location plan(s) with georeferencing points identified | Required | ✓ Yes | □No | | |
| Documentation in support of EBR Exception | N/A | Yes | □No | | |
| Proof of Compliance with EAA Requirements | Required | ✓Yes | □No | | |
| Proof of Consultation/Notification | N/A | Yes | □No | | |
| Financial Assurance Estimate | Optional | ✓ Yes | □No | | |
| Name, address and consent of land/ site owner for the installation and operation of the proposed activity or storage location of equipment or vehicle | N/A | ∐Yes | No | | |
| Name, address and phone number of the Operating Authority | N/A | ∐Yes | □No | | |
| Copy of NEPDA Permit | N/A | Yes | □No | | |
| Copy/Proof of Municipal Planning Approval (ORMCA, general) | N/A | Yes | No | | |
| Municipal Zoning Confirmation Letter | N/A | Yes | No | | |
| Zoning map | Required | ✓ Yes | No | | |
| Conservation Authority Clearance | Required | ✓ Yes | No | | |
| Director's approval for Policy 2 Deviation | N/A | Yes | □No | | |
| Application Fee | Required | ✓Yes | □No | | |
| A copy of this application has been sent to the Ministry Local District Office | Required | ✓Yes | No | | |
| Other (please describe) N/A | Optional | Yes | No ✓ | N/A | |

Completion Status (6.1 General)

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6.2 Air

| O.Z. All | | | | | | | |
|--|---------------------------------|----------------------|---|--------------|--|--|--|
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential | | | |
| Emission Summary and Dispersion Modelling (ESDM) Report prepared in accordance with s. 22 and of O. Reg. 419/05 (including signed checklist) | N/A | No Yes | | | | | |
| Electronic copy of the Dispersion Modelling input and output files prepared in accordance with s. 26 of O. Reg. 419/05 | N/A | No ☐Yes ☐ | | | | | |
| Supporting Information for a Maximum Ground Level Concentration Acceptability Request for Compounds with no Ministry POI Limit - Supplement to Application for Approval, EPA S. 9 | N/A | □Yes □No | | | | | |
| Copies of forms requesting O. Reg. 419/05 instruments and supporting documentation | N/A | ☐Yes ☐No | | | | | |
| Other (please describe) | Optional | No Yes | | | | | |
| ✓ Completion Status (6.2 Air) | | | | <u> </u> | | | |
| 6.3 Noise and Vibration | | | | | | | |
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential | | | |
| Primary Noise Screening | N/A | ☐Yes ☐ No | | | | | |
| Secondary Noise Screening | N/A | ☐Yes ☐No | | | | | |
| Acoustic Assessment Report including signed checklist (AAR) | N/A | □Yes □ ^{No} | | | | | |
| Vibration Assessment Report | N/A | Yes No | | | | | |
| Noise Abatement Action Plan | N/A | ☐Yes ☐ No | | | | | |
| Other (please describe) | Optional | No Yes | | | | | |
| ✓ Completion Status (6.3 Noise and Vibration) | | | | | | | |
| 6.4 Sewage Works | | | | | | | |
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential | | | |
| Signed Municipal Responsibility Agreement | N/A | □Yes □No | | | | | |
| Detailed description of the proposed activities/works | Required | ✓ Yes No | | | | | |
| Notice of Completion for the Environmental Study Report (ESR) | Optional | □Yes ✓ No | N/A for this application | | | | |

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| Attachment | Required, Optional or N/A | Atta | ached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
|---|---------------------------------|--------------|-------------|---|--------------|
| Design Brief | Required | ✓Yes | No | | |
| Preliminary Engineering Report | Optional | Yes | ✓ No | N/A for this application | |
| Final Plans | Required | ✓Yes | No | | |
| Engineering Drawings and Specifications | Required | ✓Yes | No | | |
| Sewage quantity and quality characteristics | Required | ∠ Yes | □No | | |
| Stormwater Management Report | Required | Yes | ✓ No | N/A for this application | |
| Stormwater Management Plan | Required | Yes | ✓ No | N/A for this application | |
| Hydrogeological Assessment with proof of concurrence from the Ministry's Regional technical support section | N/A | □Yes | No | | |
| Environmental Impact Analysis | Optional | Yes | ✓ No | N/A for this application | |
| Final effluent criteria accepted with proof of concurrence from the Ministry's Regional Technical Support Section | N/A | □Yes | No | | |
| Sewage Works Limited Operational Flexibility Requirements - Engineer's Report | N/A | Yes | No | | |
| Sewage Works Limited Operational Flexibility Requirements - Declarations | N/A | Yes | No | | |
| Pipe Design Data Form | Required | ✓Yes | □No | | |
| Other (please describe) N/A | Optional | □Yes | No 🗸 | N/A for this application | |

6.5 Waste Disposal Sites

Completion Status (6.4 Sewage)

| olo Waste Disposal Oites | | | | |
|---|---------------------------------|-----------|---|--------------|
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
| Design and Operations Report | N/A | ☐Yes ☐ No | | |
| Stormwater Management Report | Optional | ☐Yes ☐ No | | |
| Hydrogeological Assessment with proof of concurrence from the Ministry's Regional technical support section | N/A | No ☐Yes ☐ | | |
| Assessment of Physical and Water Use Conditions | Optional | □Yes □No | | |
| Waste Limited Operational Flexibility Requirements - Engineer's Report | N/A | □Yes □No | | |
| Waste Limited Operational Flexibility Requirements - Declarations | N/A | □Yes □No | | |
| Copy of notification to adjacent landowners | N/A | ☐Yes ☐ No | | |

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| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
|-------------------------|---------------------------------|-----------|---|--------------|
| Other (please describe) | Optional | ☐Yes ☐No | | |

Completion Status (6.5 Waste Disposal Sites)

6.6 Waste Management Systems

| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
|---|---------------------------------|-----------|---|--------------|
| Proof of vehicle and/or equipment ownerships | N/A | □Yes □No | | |
| Complete Fleet List (list of all vehicles, trailers and equipment used) | N/A | □Yes □No | | |
| Copy of the Liability Insurance for all vehicles for which insurance is required | N/A | ☐Yes ☐ | | |
| Copy of BUC recommendation | N/A | ☐Yes ☐ No | | |
| Copy of the storage tank design | N/A | ☐Yes ☐ No | | |
| Copy of commercial vehicle licence | N/A | ☐Yes ☐ No | | |
| Description of the physical location where the vehicles transporting biomedical waste are being disinfected | Optional | ☐Yes ☐No | | |
| Drivers Training Manual (for PCB/ Biomedical Waste) | Optional | □Yes □No | | |
| A copy of the applicant's Operation Plan including detailed packaging and biomedical waste handling methods | Optional | No Yes | | |
| Contingency and Emergency Procedures Plan (for PCB/ Biomedical Waste/Hauled Sewage (Septage)) | Optional | □Yes □No | | |
| Other (please describe) | Optional | No Yes | | |

1

Completion Status (6.6 Waste Management Systems)

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| 6.7 Mobile Waste Processing | N/A | | | |
|---|---------------------------------|----------------------|---|------------------|
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
| Design and Operations Report - Mobile Waste Processing of General Waste | N/A | Yes No | | |
| Design and Operations Report - Mobile Waste Processing of Liquid Waste | N/A | ☐Yes ☐No | | |
| Other (please describe) | Optional | No Yes | | |
| Completion Status (6.7 Mobile | Waste Proce | essing) | | |
| 6.8 Cleanup of Contaminated Sites | ☐ N/A | | | |
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
| Design Report for Cleanup of Contaminated Sites | N/A | ☐Yes ☐No | | |
| Other (please describe) | Optional | No Yes | | |
| Completion Status (6.8 Cleanu | ıp of Contam | inated Sites) | | |
| 6.9 Other Attachments | N/A | | | |
| Title | | | Reference | Confidential |
| | | | | |
| of these attachments. | of the attachn | nents included in th | nis application package, please include an add | ditional listing |
| Completion Status (6.9 Other A | Attachments) | | | |
| 6.10 Confidentiality | | | | |
| Attachment | Required, Optional or N/A | Attached? | If no, provide explanation, (include referenced attachment if more space is required for rationale) | Confidential |
| Explanation for confidentiality | N/A | ☐Yes ☐ No | | |
| ✓ Completion Status (6.10 Confi | dentiality) | | | |

Please note: The collection of personal information in this application is necessary to administer the Ministry's approvals program, which is authorized pursuant to the *Environmental Protection Act* and the *Ontario Water Resources Act*. The personal information collected in this application will be used to administer the program, including for the purposes of the Ministry's compliance and enforcement activities under the aforementioned acts, and for the purposes of making information in respect of Environmental Compliance Approvals available to the public with the exception of payment information. Questions about the collection of the information can be directed to a Client Service Representative, Client Services and Permissions Branch, 135 St. Clair Avenue West, 1st Floor, Toronto ON M4V 1P5; Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001 or Fax 416-314-8452.

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7. Authorization

7.1 Statement of the Applicant

I am authorized to prepare and submit this application and to make this certification. I have reviewed the complete application and I have made all inquiries that are necessary to declare to the best of my knowledge, information and belief:

- The information contained in this application is complete and accurate.
- The Technical Contact(s) identified in this application has/have been authorized to prepare certain technical material, and act on behalf of the applicant to discuss this application with the Ministry of the Environment and Climate Change and to provide additional information about this application to the Ministry on request.

| | The information prov | ded to the Ted | chnical Contact(| s) in relation to | this application is | s complete and accurate. |
|----------|---|------------------|--------------------|-------------------|---------------------|--|
| Name | e of Signing Authority (Please | e print) * | | | | |
| Howa | ard Culligan | | | | | |
| Title * | | | | | | |
| Broke | er of Record | | | | | |
| Telep | hone Number | ov4 | Mobile Num | ber | Fax | Number |
| | I A dalua a a | ext. | | | | |
| Email | Address | | | | | |
| Signa | iture | | | | | Date (yyyy/mm/dd) |
| J | | | | | | , |
| | | | | | | |
| / | Completion Status (7.1 Sta | atement of the | Applicant) | | | |
| 7.2 S | tatement of the Municipalit | y N/A | | | | |
| - | undersigned hereby declare in the Municipality. | on behalf of th | ne Municipality, | that the Munici | pality has no obje | ection to the construction of the |
| | e (Please print) * | | | | | |
| | (| | | | | |
| Title * | • | | | Name of Mun | icipality * | |
| | | | | Municipality | of West Elgin | |
| Signa | iture | | | | | Date (yyyy/mm/dd) |
| | | | | | | |
| X | Completion Status (7.2 Sta | atement of the | Municipality) | | | |
| 7.3 S | tatement of Technical Con | tacts | | | | |
| Tech | nical Contact 1 | | | | | |
| that a | | ı. I have reviev | ved those techn | | | onsibility identified in section 2.6 all inquiries that are necessary to |
| | The technical mater 2.6 are complete and acc | | in this applicatio | n in respect of | the area(s) of re | sponsibility identified in section |
| | I have the relevant educat | ion and experi | ence necessary | to provide this | certification. | |
| | e of Technical Contact (Pleas Romero | se print) * | | | | |
| Signa | | | | | | Date (yyyy/mm/dd) |
| - | | | | | | , |
| | | | | | | |

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Completion Status (7.3 Statement of Technical Contacts)

8. Payment Information - Application for an Environmental Compliance Approval

Please Note:

- 1. If this form has been completed by hand, the fee calculations must be completed and attached separately. The supplemental fee calculations do not need to be included if this form has been completed electronically.
- 2. If this form has been completed electronically, the fees for this application have been calculated based on the information provided. The Ministry may require additional information during the review of the application that could impact the total fee required.
- 3. All fees should be paid in Canadian funds, payable to the *Minister of Finance*, except fees for *Transfer of Review*, which are payable to the local municipality.
- 4. Credit card payments are accepted for payments under \$10,000 only. Never email credit card information.
- 5. If payment is being made by certified cheque or money order, please staple the payment to this page.
- 6. The information collected in this section of the form is considered confidential and will only be used to process the application fee.
- 7. To protect credit card information, do not submit this page containing payment information via e-mail or any other electronic means if it includes credit card information. Credit card information should be submitted only by mail, facsimile, or hand-delivery. Applications containing payment information that are submitted via e-mail or any other electronic means will not be processed and will be destroyed.

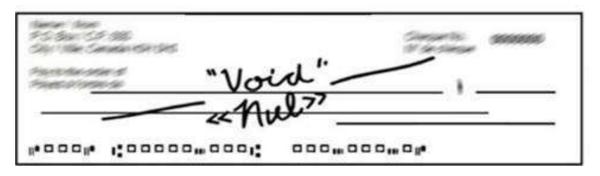
Do not include this page in the copies of the application that are being provided to the Local Ministry District Office.

| Amount Enclosed | Method of Payment * | | | |
|---|---------------------------------------|---------------------|--|--|
| | ✓ Certified Cheque ☐ Money Order ☐ VI | SA MasterCard | | |
| Credit Card Information (if paying by VISA or MasterCard) | | | | |
| Name of Cardholder (Please print) | | | | |
| | | | | |
| Cond Number | | Evning Data (mm/m) | | |
| Card Number | | Expiry Date (mm/yy) | | |
| | | | | |
| Card Holder's Signature | | Date (yyyy/mm/dd) | | |
| | | | | |
| | | | | |

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Completion Status (8 Payment Information)

If paying by certified cheque or money order, please attach it here.



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Application Summary

| For Office Use Only | | | |
|---------------------|-----------------------|-------------------|----------|
| Reference Number | Payment Received (\$) | Date (yyyy/mm/dd) | Initials |

Applicant Name

Seaside Waterfronts Inc.

Project Name

Wastewater Treatment System - Seaside Development

Project Description Executive Summary

MTE Consultants Inc. (MTE) was retained by Seaside Waterfronts Inc. to complete the design of a communal wastewater treatment plant (WWTP) for the proposed development located in Port Glasgow on Part Lot 6, Concession 14, Aldborough Ward, in the Municipality of West Elgin, County of Elgin.

Seaside Waterfronts Inc. is proposing a Residential-Commercial Development, in approximately 24 hectares of land. The proposed development will include a combination of 343 residential units (single detached, townhomes and apartment units), and commercial areas. The entire development will be constructed in three separate phases. The WWTP will be required to treat domestic sewage generated from the residential and commercial units proposed for the development. Treated effluent will be discharged onto the constructed wetland, which will indirectly discharge to Sixteen Mile Creek. The proposed WWTP to service the proposed development will be a Newterra Membrane Bioreactor (MBR) designed for an average flow of 325 m3/day, and flow equalization ahead of the treatment works. The complete wastewater treatment system will be installed within three separate phases, coinciding with the phasing of the proposed development.

Supplemental Application Information

MECP Pre-consultation was completed as part of the Class EA process

Application Status

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| Section | Completed? |
|-----------------------------|------------|
| 1. Application Information | Ye No |
| 2. Project Information | Ye No |
| 3. Regulatory Requirements | Ye No |
| 4. Site Information | Ye No |
| 5. Facility Information | Ye No |
| 6. Supporting Documentation | Ye No |
| 7. Payment Information | Ye No |
| 8. Authorization | Ye No |

Fee Summary

| Activity | Amount (\$) |
|---------------------------------|-------------|
| Administrative Processing | \$200.00 |
| Review of EPA s. 9 activities | \$0.00 |
| Review of EPA s. 27 activities | \$0.00 |
| Review of OWRA s. 53 activities | \$5,000.00 |
| Total Fee | \$5,200.00 |

The Ministry may request additional fees upon review of this application.

If this form is submitted in print version only and the smart calculation feature is not used, please attach the fee calculation separately.

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