

Soils Management

Application Form



Please email your application to: planning@squamish.ca

BEFORE YOU SUBMIT YOUR APPLICATION FORM:

- Discuss your project with a Development Services representative.
- Prepare all required documentation for your application submission with your application form and fee.

OFFICE USE ONLY:

Date Received: YYYY/MM/DD

File No.: _____

Project No.: _____

APPLICATION TYPE (check all applicable boxes):

Soil Deposit, Total Volume:

Soil Removal, Total Volume:

Is a portion of this Preload? Yes

No

If so, specify preload volume deposited / removed:

APPLICANT DETAILS:

Full Name: _____

Business Name (if applicable): _____

Mailing Address & City: _____

_____ Postal Code: _____

Business Ph: _____ Cell Ph: _____

Email: _____

OWNER DETAILS: (Primary Owner only)

Full Name: _____

Mailing Address & City: _____

_____ Postal Code: _____

Home Ph: _____ Email: _____

I consent to the proposed soil deposit and/or removal work included in this application:

Signature: _____

PROPERTY INFORMATION:

Civic Address: _____

Legal Description (on *Land Title Certificate*) or PID: _____

Size of Property (Hectares): _____

DEVELOPMENT APPROVAL INFORMATION: See *Official Community Plan (OCP) Part 4 Section 30, and District of Squamish Land Development Procedures Bylaw 2632, 2018.*

NATURAL HAZARDS:

Soil Management applications located within a natural hazard area require Hazard Assessments prepared by a Qualified Professional in accordance with Terms of Reference established by the District. Please indicate if the project is located in any of the following:

Identified flood or debris hazard areas on OCP Schedule D-1 or Schedule E:
 No Yes,

*Refer to Hazard Policies and Requirements in the *Official Community Plan*, Part 3, Section 11 and established [Terms of Reference for Natural Hazard and/or Risk Assessments](#).

Areas designated as *Primary Floodways, Secondary Floodways or Debris Hazard Areas* as shown on OCP Schedule L*: No Yes, * Refer to the *Official Community Plan, Development Permit Area 2 Protection from Flood Hazard Guidelines*.

Area subject to rockfall, land slip, or having steep slopes of equal to or greater than 25% per Schedule E:
 No Yes, *Refer to Hazard Policies in Part 3, Section 11 of the *Official Community Plan*.

NATURAL ENVIRONMENT:

Environmental Assessments prepared by a Qualified Environmental Professional may be required for Soils Management Permits. [Refer to the District's Terms of Reference for Preliminary Site Surveys and Detailed Site Bio-inventories](#).

Are the subject lands identified as an *Environmental Review Area* on OCP Schedule K-1*:
 No Yes*

* Refer to the *Official Community Plan, Development Permit Area 1 Environmental Protection Guidelines*. Updated Terrestrial and Aquatic (watercourses, wetlands and marine shoreline) guidelines apply to environmentally sensitive review areas on OCP Schedule K-1, as well as ditches as shown on Schedule K-2. * Note that DPA1 applies to parcels of land either entirely or partially within a *Riparian Assessment Area* as defined by the OCP Bylaw, whether or not it is mapped on Schedules K-1 or K-2.

ZONING INFORMATION:

Current Zoning of property: _____ Is
there a proposal for rezoning: Yes No
If yes, to which zoning classification: _____

PROPOSAL DESCRIPTION: Clearly explain the proposed project.

Provide a description of the proposed soil deposit or removal, with a statement of purpose and rationale.

PROFESSIONAL DETAILS:

- **Professional Engineer** Full Name: _____
Business Ph: _____ Email: _____
- **Environmental Professional** Full Name: _____
Business Ph: _____ Email: _____
- **Other:** _____ Full Name: _____
Business Ph: _____ Email: _____

The information on this form is collected under the authority of Soils Management Bylaw and is only used to process your application. Objective is to collect business information, should personal information be provided through this application form it will only be used for the purpose of processing this application. The collection, use and disclosure of personal information is subject to the provisions of the Freedom of Information and Protection of Privacy Act. The information collected will be retained and disposed according to the District of Squamish Records Management Bylaw No. 2622, 2019 and the District of Squamish Records Classification and Retention Schedule. If you have any questions, please contact the Manager of Legislative Services at 604-815-5023.

I/we hereby represent and warrant to the District of Squamish, knowing that the District relies on this representation and warranty, that the property covered by this application has never, to the best of my/our knowledge having made due and diligent inquiry, been used for any purpose such that a site profile is required to be submitted under the *Waste Management Act (British Columbia)* and that the property is not contaminated or polluted in any way that would make it unlawful, unsafe, or unsuited for the purpose for which it is to be used, including within the meaning of the *Waste Management Act (British Columbia)*.

I/we acknowledge that I/we have attached to this Application all required documents plus all required fees, and hereby agree to submit further information deemed necessary for processing this Application.

This project will be constructed in conjunction with the District’s *Wildlife Attractant Bylaw 2053, 2009*, and in accordance with Bear Aware best practices.

_____	_____	DD / MM /
YYYY		
Full Name of Applicant (please print)	Signature of Applicant	Date

_____	_____	DD / MM /
YYYY		
Full Name of Primary Landowner (please print)	Signature of Primary Owner	Date

_____	_____	DD / MM /
YYYY		
Full Name of Secondary Landowner (please print)	Signature of Secondary Owner	Date

IMPORTANT: Applications are not accepted unless complete with required fee and documents. For your application to be complete, please ensure to include Soils Management Document Checklist and supporting documentation with your application. (Soils Management Document Checklist).