

## Registration Form

for authorization to discharge waste under the *Environmental Management Act*

### Code of Practice for the Slaughter and Poultry Processing Industries

FORM REFERENCE CODE: EPD-SPP-01.2

#### INSTRUCTIONS:

The registration process under this Code does not require a preliminary registration or pre-registration meetings with Ministry staff. **This form may be used for submission of a Registration under the Code of Practice for the Slaughter and Poultry Processing Industries.**

Before completing this registration form, please review the following:

- Code of Practice for the Slaughter and Poultry Processing Industries under the *Environmental Management Act* at [www.bclaws.ca](http://www.bclaws.ca); and,
- Ministry information and guidance documents that will assist in understanding the registration process and any other documents that may be required at <http://www2.gov.bc.ca/gov/content?id=0876E90DA4744A449423D35EB4E09785>.

**It is preferred that this form is completed using a computer or typewriter.** If completing this form by hand, please PRINT clearly.

Mandatory fields are marked with an asterisk (\*). Please ensure all required fields are completed or the registration form may not be accepted.

Sending the following completed information to the Ministry of Environment and Climate Change Strategy by email or mail to the address noted below constitutes submitting a registration application to a Director under the Code.

Under the *Environmental Management Act*, SBC 2003, c. 53 (the “Act”), a person is prohibited from introducing waste into the environment except in compliance with the Act and any applicable regulations.

The registrant does not have authorization to discharge under the Code until a complete registration form and all required information has been submitted. A submitted Registration becomes effective 45 days after the date the person delivers the registration to a Director; OR, when the Director provides written notice that the registration is effective.

This registration form can be submitted to the Ministry by email (preferred), by mail or by courier.

**There is no application fee however there is an annual fee payable upon registration. See Section 9 for information.**

| Mail or Email   | Courier  |
|---|--|
| Environmental Protection Division<br>Business Services<br>PO Box 9377 Stn Prov Govt<br>Victoria, BC V8W 9M6<br><br><b>Email:</b> <a href="mailto:PermitAdministration.VictoriaEPD@gov.bc.ca">PermitAdministration.VictoriaEPD@gov.bc.ca</a> | Ministry of Environment & Climate Change Strategy<br>Environmental Protection Division<br>Business Services<br>3rd Floor, 525 Superior Street<br>Victoria BC V8V 0C5 |

## Section 1: Purpose of Registration

|  |  |   |
|--|--|---|
| <b>*Application Type</b> (check one)           | <input type="checkbox"/> New registration<br><input type="checkbox"/> Change in information to an existing registration (provide registration #) | 1 |
| <b>*Registration Number</b><br>(if applicable) |  | 2 |

**Transferring a registration is not permissible under this regulation. The existing registration holder should cancel their registration, and the new owner must apply for a new registration (using this form). To cancel a registration, use the Abandonment, Cancellation and De-Registration Request Form (EPD-EMA-A3).**

To change information for an existing registration, a person must submit this completed form within 30 days after completion of a modification to the facility.

## Section 2: Registrant Information (“the Registrant”)

This must be the name of the company or person seeking registration under the Code, NOT an Agent acting on their behalf.

|  |   |          |             |   |
|--|---|----------|-------------|---|
| <b>*Registrant Type</b>  | <input type="checkbox"/> Business <input type="checkbox"/> Individual <input type="checkbox"/> Government |          |             | 1 |
| <b>*Company Legal Name</b><br><i>as registered with the BC Registrar of Companies</i>                  |   |          |             | 2 |
| <b>OR * Individual’s Full Legal Name</b>   |   |          |             | 3 |
| <b>Doing Business As</b><br><i>if applicable</i>   |   |          |             | 4 |
| <b>Incorporation Number</b><br><i>as registered with the BC Registrar of Companies (if applicable)</i> |   |          |             | 5 |
| <b>*Contact Numbers</b><br><i>e.g. (999) 999-9999</i>  | Phone   | Mobile   |             | 6 |
| <b>*Email Address</b><br><i>generic company email address</i>  |   |          |             | 7 |
| <b>*Legal Address</b><br><i>as registered with BC Registrar of Companies</i>                           | Unit # / Street   |          |             | 8 |
|  | City  | Province | Postal Code | 9 |

|  |   |          |             |    |
|--|---|----------|-------------|----|
| <b>*Mailing Address</b><br><i>if different from above</i>      | <input type="checkbox"/> Same as Legal Address  |          |             | 10 |
|  | Unit # / Street   |          |             | 11 |
|  | City  | Province | Postal Code | 12 |
| <b>*Billing Address</b><br><i>if different from above</i>      | <input type="checkbox"/> Same as Mailing Address <input type="checkbox"/> Same as Legal Address |          |             | 13 |
|  | Unit # / Street   |          |             | 14 |
|  | City  | Province | Postal Code | 11 |
| <b>Billing Email Address</b><br><i>if different than above</i> |   |          |             | 12 |

### Section 3: Registrant's Contact for Technical Information

Name of the person the Ministry can contact regarding the technical details for this registration that is NOT the Agent.

|  |   |          |             |   |
|--|---|----------|-------------|---|
| <b>Contact's Last Name</b>                           |   |          |             | 1 |
| <b>Contact's First Name</b>                          |   |          |             | 2 |
| <b>Contact's Title</b>                               |   |          |             | 3 |
| <b>Mailing Address</b>                               | <input type="checkbox"/> Mailing address is the same as Section 2 above |          |             | 4 |
|  | Unit # / Street   |          |             | 5 |
|  | City  | Province | Postal Code | 6 |
| <b>Contact Numbers</b><br><i>e.g. (999) 999-9999</i> | Phone   | Mobile   |             | 7 |
| <b>Email Address</b>                                 |   |          |             | 8 |

## Section 4: Authorized Agent (“the Agent”)

**The Registrant may authorize an Agent to deal with the Ministry directly on future aspects of this registration. This section must be completed in full if an Agent is used. An Agent is a person who is not an employee of the Registrant.**

|  |                 |          |             |   |
|--|-----------------|----------|-------------|---|
| <b>Agent’s Company Legal Name</b><br><i>as registered with the BC Registrar of Companies</i> |                 |          |             | 1 |
| <b>Doing Business As</b><br><i>if different than above</i>                                   |                 |          |             | 2 |
| <b>Agent’s Last Name</b>   |                 |          |             | 3 |
| <b>Agent’s First Name</b>  |                 |          |             | 4 |
| <b>Agent’s Title</b>   |                 |          |             | 5 |
| <b>Mailing Address</b>   | Unit # / Street |          |             | 6 |
|  | City            | Province | Postal Code | 7 |
| <b>Contact Numbers</b><br><i>e.g. (999) 999-9999</i>   | Phone           | Mobile   |             | 8 |
| <b>Email Address</b>   |                 |          |             | 9 |

*In this section:*

*“Registrant” means the applicant as identified in section 2 of this registration form;*

*“Agent” means the Agent as identified in section 4 of this registration form.*

**I/we (the Registrant) hereby authorize the above-named Agent to deal with the Ministry directly on all aspects of this registration. I/we (the Registrant) understand and agree with the terms and conditions in Section 8 of this registration form.**

|   |  |  |  |    |
|---|--|--|--|----|
| <b>Registrant’s Full Name</b><br><i>NOT the Agent</i> |  |  |  | 10 |
| <b>Date signed</b>                                    |  |  |  | 11 |
| <b>Signature of the Registrant</b>                    |  |  |  | 12 |

## Section 5: Facility Location and Operator Information

|  |   |    |
|--|---|----|
| <b>*Facility Type</b><br><i>describe the primary activity of the facility</i>  | <input type="checkbox"/> Slaughtering poultry<br><br><input type="checkbox"/> Slaughtering livestock (red meat)                                     | 1  |
| <b>FOR INTERNAL USE ONLY:</b> <ul style="list-style-type: none"> <li>Use Primary BCENIC of 112020 for poultry and 112025 for livestock</li> <li>Waste Discharge Regulation Schedule: 2 "slaughter industry"</li> </ul> |   |    |
| <b>*Regional District</b>  |   | 2  |
| <b>*Facility Location</b><br><i>approximate centre of the site</i><br><br><i>must be in decimal degree format to 4 decimal places</i>  | Latitude (e.g., 49.8952)    N   | 3  |
|  | Longitude (e.g., 116.8177)    W   |    |
| <b>*Source of Data</b>   | <input type="checkbox"/> GPS <input type="checkbox"/> Survey <input type="checkbox"/> Google Earth<br><br><input type="checkbox"/> Other (specify): | 4  |
| <b>*Either Legal Land Description or PID/PIN/Crown File Number is required.</b>  |   |    |
| <b>Legal Land Description (Lot/Block/Plan)</b>   |   | 5  |
| <b>PID/PIN/Crown File No.</b>  |   | 6  |
| <b>*Facility Address</b>   | <i>Street / City / Province / Postal Code</i><br><i>OR if no civic address, describe location (e.g. 3 km north of Sechelt, BC, on Highway 101)</i>  | 7  |
| <b>*Is the registrant the facility operator?</b>   | <input type="checkbox"/> Yes (proceed to Section 6) <input type="checkbox"/> No (provide information below)   | 9  |
| <b>Facility Operator Information (if the registrant is NOT the Facility Operator)</b>  |   |    |
| <b>Last Name</b>   |   | 10 |
| <b>First Name</b>  |   | 11 |
| <b>Title</b>   |   | 12 |
| <b>Contact Numbers</b><br><i>e.g. (999) 999-9999</i>   | Phone   | 13 |
|  | Mobile  |    |
| <b>Email Address</b>   |   | 14 |

## Section 6: Legal Land Owner of Facility

|   |  |         |
|---|--|---------|
| *The Legal Land Owner of the facility is the Registrant.                      | <input type="checkbox"/> Yes <input type="checkbox"/> No | 1       |
| <b><i>*If the Registrant is not the Legal Land Owner:</i></b>                 |  |         |
| Is this federal or provincial Crown land?                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No | 2       |
| Is the Legal Land Owner aware of the proposed application to discharge waste? | <input type="checkbox"/> Yes <input type="checkbox"/> No | 3       |
| Has the Legal Land Owner received a copy of this application?                 | <input type="checkbox"/> Yes <input type="checkbox"/> No | 4       |
| Legal Land Owner First and Last Name  |  |         |
| <b>Legal Land Owner Contact Numbers</b><br><i>e.g. (999) 999-9999</i>         | Phone:   | Mobile: |
| Legal Land Owner Email Address  |  |         |

## Section 7: Code Specific Requirements

|   |   |   |
|---|---|---|
| <b>*Annual Production</b>                   | Tonnes live weight killed (per calendar year)   | 1 |
| <b>*Maximum wastewater discharged</b>       | cubic meters per day  | 2 |
| <b>*Description of the discharge source</b> | <input type="checkbox"/> red meat wastes <input type="checkbox"/> poultry processing wastes | 3 |

|  |   |   |
|--|---|---|
| <b>*Please indicate applicable discharge types</b> |   | 4 |
| <b>Liquid (wastewater)</b>                         | <input type="checkbox"/> Subsurface Discharge (e.g. tile/drain field)<br><input type="checkbox"/> Spray Irrigation<br><input type="checkbox"/> Land Discharge by a farmer (as per section 8(5) of the Code of Practice)<br><input type="checkbox"/> Other (please indicate) | 5 |
| <b>Refuse (solid and semi-solids)</b>              | <input type="checkbox"/> Landfill<br><input type="checkbox"/> Composting    Indicate quantity (tonnes per year) _____<br><input type="checkbox"/> Other (please indicate)   |   |
| <b>Air Emissions</b>                               | <input type="checkbox"/> Incineration<br><input type="checkbox"/> Other (please indicate)   |   |

**Please indicate which of the required plans are complete, and available if requested:**

The discharger must make all records available for inspection by an officer or director and must provide a copy on request within 2 business days.

|  |  |   |
|--|--|---|
| <b>*Nutrient management plan for wastewater</b>                          | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable | 5 |
| <b>*Nutrient management plan for land application of compost product</b> | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable | 6 |
| <b>*Landfill groundwater monitoring and assessment plan</b>              | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable | 7 |
| <b>*Landfill vector control plan</b>                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable | 8 |
| <b>*Landfill closure plan</b>  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable | 9 |

## Section 8: Declaration and Signature

Please carefully read the following before placing your signature.

**By completing this Registration for an authorization, the Registrant understands and agrees with the following terms and conditions:**

1. In this section:

“Registrant” means the registrant as identified in section 2 of this registration form;

“Director” means any statutory decision maker under EMA;

“EMA” means the *Environmental Management Act*, S.B.C. 2003, c. 53, as amended or replaced from time to time;

“FOIPPA” means the *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165, as amended or replaced from time to time;

“Province” means Her Majesty the Queen in Right of British Columbia;

“Regulatory Document” means:

- a) this registration form,
- b) any document that the Registrant submits or causes to be submitted to the Province or the Director in support of this registration, and
- c) any document that the Registrant submits or causes to be submitted to the Director or the Province pursuant to
  - i. any regulation made under EMA that regulates the facility described above or the discharge of waste from that facility; or
  - ii. any order issued under EMA directed against the Applicant that is related to the facility described above or the discharge of waste from that facility.

2. In consideration of the Province receiving this registration form, subject to paragraph 3, the Registrant hereby irrevocably authorizes the Province to publish on the B.C. government website the entirety of any Regulatory Document.

3. Despite paragraph 2, if the Registrant clearly identifies on the face of a Regulatory Document that the Regulatory Document, or clearly identified portions of it, are confidential and provides in writing with the document a rationale for why the document or portion thereof could not be disclosed under FOIPPA, the Registrant does not consent to the Province publishing the document or any portion of it if, in the opinion of the Director, the document or portion could not be disclosed under FOIPPA, if it were subject to a request under section 5 of FOIPPA.

4. In consideration of the Province receiving this application, the Registrant agrees that it will indemnify and save harmless the Province and the Province’s employees and agents from any claim for infringement of copyright or other intellectual property rights that the Province or any of the Province’s employees or agents may sustain, incur, suffer or be put to at any time that arise from the publication of a Regulatory Document.

5. The Registrant certifies that the information provided in this registration form is true, complete and accurate, and acknowledges that the submission of insufficient information may result in this registration being returned causing delays in the registration review process.

| *Name of Registrant or Agent (print) | *Signature of Registrant or Agent | *Date |
|--------------------------------------|-----------------------------------|-------|
|                                      |                                   |       |



## Section 9: Payment of Application Fees

### PART A: Application Fee Calculation

|                                     |  |   |
|-------------------------------------|--|---|
| <p><b>Applicable fees</b></p>       | <p>There is no application fee; however, the first annual fee is due upon initial submission of a new Registration which is calculated as follows:</p> <p>Annual Fee = \$200 per media</p> <p>Check all that apply:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Air emission = \$200</li> <li><input type="checkbox"/> Effluent (liquid waste) = \$200</li> <li><input type="checkbox"/> Refuse (solid and semi-solid wastes) = \$200</li> </ul> <p><b>Total annual fee amount = Maximum of \$600</b></p> <p>Fees are \$CDN. No PST or GST required.</p> | 1 |
| <p><b>*Total annual fee due</b></p> | <p>\$</p>  | 2 |

### PART B: Fee transmittal

|  |  |                |   |
|--|--|----------------|---|
| <p><input type="checkbox"/> I would like a call-back to pay by credit card.<br/><b>* DO NOT SEND CREDIT CARD INFORMATION VIA EMAIL *</b></p> | <p><b>Please note there is currently no electronic payment system for credit card transactions. Please complete the following to arrange for a call-back to collect credit card payment information.</b></p>   |                | 1 |
|  | <p>Name of cardholder</p>  |                |   |
|  | <p>Phone number</p>  | (999) 999-9999 |   |
| <p><input type="checkbox"/> I am submitting my cheque or money order via mail/courier.</p>   | <p><b>Cheques or money orders not received within 10 business days may result in your application being returned as incomplete.</b></p> <p><b>In addition to submitting this application form electronically, please send a printed copy along with your cheque or money order.</b></p> <p><i>Mail:</i> Environmental Protection Division<br/>Business Services<br/>PO Box 9377 Stn Prov Govt<br/>Victoria, BC V8W 9M6</p> <p><i>Courier:</i> Ministry of Environment &amp; Climate Change Strategy<br/>Environmental Protection Division<br/>Business Services<br/>3rd Floor, 525 Superior Street<br/>Victoria BC V8V 0C5</p> |                | 2 |
| <p><input type="checkbox"/> I have questions about the application fees and would like a call-back for consultation.</p>                     | <p>Name</p>  |                | 3 |
|  | <p>Phone number</p>  | (999) 999-9999 |   |