Ministry of Environment and Climate Change Strategy

Pesticide Use Permit Application

under *the Integrated Pest Management Act*

FORM REFERENCE CODE: EPD-IPM-10v2

INSTRUCTIONS:

Use this form to apply for a pesticide use permit under the *Integrated Pest Management Act* and Regulation. Pesticide use must not proceed unless a permit has been issued.

The permitting process consists of several steps that require the submission of an application form, map and fee, followed by meetings with ministry staff to receive guidance on the consultation process and required documentation. If you have questions, you are encouraged to contact ministry staff by email at IPMPBC@gov.bc.ca .

HOW TO SUBMIT:

Please submit this form and maps via email to IPMPBC@gov.bc.ca with the subject line "Pesticide Use Permit Application". If large files prevent email submission, please use the ministry's File Transfer Service at http://www.env.gov.bc.ca/csd/imb/soft/soft.shtml.

There is an application fee of $1000 that is due upon submission of this application. The fee is non-refundable after a permit application number has been issued. Please see Section 12 for payment information.

Alternatively, you may mail your application to:

Regional Operations Branch IPM Program
Ministry of Environment & Climate Change Strategy
PO Box 9377 Stn Prov Govt
Victoria, BC V8W 9M6

Section 1: Applicant Information

Applicant Type	☐ Business ☐ Individual ☒ Government			1
Company Legal Name *as registered with the BC Registrar of Companies* ***OR*** **Individual's Full Legal Name**	British Columbia Ministry of Agriculture and Food, Plant and Animal Health Branch			2
Doing Business As *if applicable*				3
Incorporation Number *as registered with the BC Registrar of Companies (if applicable)*				4
Legal Address *as registered with BC Registrar of Companies*	Unit # / Street			5
	City	Province	Postal Code	6
Mailing Address	☒ Same as Legal Address			7
	Unit # / Street			8
	City	Province	Postal Code	9

Section 2: Contact Information for the Applicant

Contact's Last Name			1
Contact's First Name			2
Contact's Title	Director, Plant Health, Plant and Animal Health Branch, BC Ministry o		3
Contact Numbers *(999) 999-9999*	Phone	Mobile	7
Email Address	FLNRGypsyMothInfo@gov.bc.ca		8

Section 3: Authorized Agent ("the Agent")

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

Agent's Type	☐ Business ☐ Individual ☐ Government			1
Agent's Company Legal Name *as registered with the BC Registrar of Companies (if applicable)*				2
Doing Business As *if applicable*				3
Agent's Last Name				4
Agent's First Name				5
Agent's Title				6
Contact Numbers *(999) 999-9999*	Phone	Mobile		7
Email Address				8
Mailing Address	Unit # / Street			9
	City	Province	Postal Code	10

In this section:
"Applicant" means the Applicant as identified in section 1 of this application form, and
"Agent" means the Agent as identified in section 3 of this application form.

I/we (the Applicant) hereby authorize the above-named Agent to deal with the ministry directly on all aspects of this application. I/we (the Applicant) understand and agree with the terms and conditions in Section 12 of this application form.

Applicant's Full Name		1
Signature of the Applicant		2
Date signed *(YYYY / MM / DD)*		3

Section 4: Owner or Manager of the Treatment Location

Name of the owner or manager of the treatment location

British Columbia Ministry of Agriculture and Food, Plant and Animal Health Branch (Tracy Hueppelsh

Section 5: Description of Proposed Pesticide Use

Please provide a brief overview of the proposed pesticide use.

Pest(s) to be controlled and the importance of the pest control program	Spongy moth (formerly gypsy moth): an invasive insect pest that must be eradicated to maintain the Province's spongy moth-free status for both socio-economic and environmental reasons.	1
Proposed Integrated Pest Management elements (including pest prevention and identification, monitoring program, treatment thresholds, post-treatment evaluation) and the rationale for the proposed pesticide use	Spongy moth is frequently introduced through the movement of household and recreational goods into the province from infested areas. These periodic introductions are detected by the Canadian Food Inspection Agency (CFIA), who carry out annual monitoring across the province. Once an establishing population is detected (positive detections in the same area two-years in a row or more than 10-12 moths in one trap), the Spongy Moth Technical Advisory Committee (MOF, Ministry of Environment and Climate Change Strategy, Ministry of Agriculture and Food, Ministry of Water, Land & Resource Stewardship, CFIA, Canadian Forest Service and Invasive Species Council B.C., independent members) determine the best method for eradication. The biological insecticide Foray 48B (active ingredient Bacillus thuringiensis var kurstaki (Btk)) is approved for use over populated areas by Health Canada's Pest Management Regulatory Agency. Each area identified for eradication will be treated three times (typically 7 - 10 days apart) in the spring. Spray deposit is monitored with kromekote cards to ensure adequate application of Foray 48B and weather is monitored to ensure permit requirements are met and the product settles in the targeted area (rain and wind). Treatment efficacy is monitored by CFIA through their annual pheromone trapping program.	2

Section 6: Proposed Start and End Date of Pesticide Use

Please provide the proposed start and end date of pesticide use. The maximum term of a permit is three years.

Start date *(YYYY / MM / DD)*	2026-04-01	1
End date *(YYYY / MM / DD)*	2026-06-30	2
Timing of pesticide applications (i.e. time of the year and duration)	Three treatments of each treatment area between April 1 and June 30. Each spray is usually 7 - 10 days apart and completed in the early morning hours (first light - 8:00 am; all flights over	3
Anticipated number of applications per year	Three applications over each area. A single application can take more than one day to complete (due to weather or mechanical delays)	4

Section 7: Geographic Area to be Treated

You will need to submit a digital map with this application form. Your map must identify the gross boundaries of the treatment area, communities, and geographic features applicable to the proposed pesticide use. At a minimum, maps must be provided in PDF format. Additional acceptable formats include .kmz or kml.

In addition to your digital map, please describe the area of the proposed pesticide use below. The description must be consistent with the attached maps and include the names of the communities or landmarks and all regional districts encompassed by the geographic boundaries of the treatment area.

Delta (36 hectares): Northern boundary extends from 300 m north of 17A Ave, from the shoreline (49° 2'13.99"N, 123° 3'6.43"W), west to the north side of Beach Grove Elementary (49° 2'14.31"N, 123° 3'33.24"W). Western boundary extends from the north side of Beach Grove Elementary, southwest to 16A Ave (49° 1'57.86"N, 123° 3'40.65"W) and southeast to Farrell Crescent (49° 1'52.27"N, 123° 3'38.52"W). Southern boundary extends from Farrell Crescent (49° 1'52.27"N, 123° 3'38.52"W), east to the shoreline (49° 1'51.85"N, 123° 3'18.75"W), approximately 90 m south of 16th Avenue. Eastern boundary extends from the shoreline, 90 south of 16 Ave (9° 1'51.85"N, 123° 3'18.75"W), north along the shoreline to approximately 300 m north of 17A Ave (49° 2'13.99"N, 123° 3'6.43"W).

Squamish: (121 hectares): Northern boundary extends from 3 Ave @ Bailey Street (49°42'14.31"N, 123° 9'7.32"W), northwest to Wilson Crescent (49°42'31.44"N, 123° 9'14.85"W; northeast of Tantalus Manor parking lot), northwest along Wilson Crescent to McNamee Place (49°42'35.96"N, 123° 9'22.84"W) and southwest into the wildlife management area (49°42'25.62"N, 123° 9'47.81"W). Western boundary extends 1000 m southwest through the wildlife management area (49° 42'25.62"N, 123° 9'47.81"W to 49°41'56.08"N, 123°10'8.87"W). Southern boundary extends approximately 835 m through the wildlife management area (49°41'56.08"N, 123°10'8.87"W) to 3 Ave (49°41'38.29"N, 123° 9'37.70"W). Eastern boundary extends northeast along 3 Ave (49° 41'38.29"N, 123° 9'37.70"W) to Bailey Street (49°42'14.31"N, 123° 9'7.32"W).

Section 8: Type of Pesticide Use

Please check the category below that corresponds with your intended pesticide use.

a) ☐ Permit-restricted pesticide

b) ☒ Aerial application of a pesticide

c) ☐ Use of a pesticide in or on a body of water

d) ☐ Use of a pesticide on public land as required under a license or confirmation

e) ☐ Use of a pesticide under a confirmation or licence requiring an exemption from the applicable prescribed standards in Division 7, Part 2 of Integrated Pest Management Regulation

If you checked category(e) above, please indicate:

Existing licence or confirmation number for which an exemption is required		1
Section of the regulated standard requiring an exemption		2
Proposed alternative terms and conditions		3

Section 9: Pesticide Information

Please list all pesticides, including adjuvants, proposed for use under this permit.

Pesticide Trade Name	Active Ingredient	Registration Number under the Federal *Pest Control Products Act* (P.C.P. No)	Application Rate	Treatment Area (ha)	Quantity (kg)
Foray 48B	Bacillus thuringiensis va	24977	4L/ha	121 ha	1,452 L
Foray 48B	Bacillus thuringiensis va	24977	4L/ha	36 ha	432 L

Section 10: Pesticide Application Methods

Please check all applicable proposed pesticide application methods.

1. Broadcast
   - ☒ Aerial
   - ☐ Backpack sprayer
   - ☐ Power nozzle
   - ☐ Boom Sprayer
2. Selective Treatment
   - ☐ Backpack sprayer
   - ☐ Stem injection
   - ☐ Wipe-on
3. ☐ Immersion Bath
4. ☐ Other

If you checked the category *"Other"* above, please specify the methods proposed.

Section 11: Declaration and Signature

By completing this application form for a permit, the Applicant understands and agrees with the following terms and conditions:

1. In this section:
   "Administrator" means the administrator appointed under IPMA Section 9;
   "Applicant" means the applicant as identified in section 1 of this application form;
   "IPMA" means the *Integrated Pest Management Act*, S.B.C. 2003, c. 58, 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 application form,
   b) any document that the Applicant submits or causes to be provided submitted to the Province or the Administrator in support of this application, and
   c) any document that the Applicant submitted or causes to be submitted to the Administrator or the Province pursuant to
      i. the permit;
      ii. any regulation made under IPMA that regulates the pesticide use described above; or
      iii. any order issued under IPMA directed against the Applicant that is related to the pesticide use described above.
2. In consideration of the Province receiving this application, subject to paragraph 3, the Applicant 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 Applicant 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 Applicant does not consent to the Province publishing the document or any portion of it if, in the opinion of the Administrator, 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 Applicant 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 Applicant certifies that the information provided in this application form is true, complete and accurate, and acknowledges that the submission of insufficient information may result in this application being returned causing delays in the application review process.

I am:	☒ The Applicant ☐ The Agent	1
Full Name *(Name of the Applicant, or name of the Agent)*	British Columbia Ministry of Agriculture and Food, Plant and Animal Health	2
Signature:		3
Date signed: *(YYYY / MM / DD)*		4

Section 12: Payment of Fees

The application fee is $1000 CAD. No PST or GST is required.
The fee is non-refundable after a permit application number has been issued.

☒ **I would like a call-back to pay by credit card**	Currently, there is no electronic payment system for credit card transactions. Please complete the following to arrange for a call-back to collect credit card payment information. **DO NOT ENTER CREDIT CARD INFORMATION HERE OR SEND BY EMAIL.**		1
	Name of cardholder	Forest Science, Planning and Practices Branch	2
	Phone number *(999) 999-9999*		3
☐ **I am submitting my cheque or money order via mail/courier**	Cheques or money orders not received within 10 business days may result in your application being returned as incomplete. In addition to submitting this application form electronically, please send a printed copy along with your cheque or money order.		4
	Mail:	Ministry of Environment & Climate Change Strategy Regional Operations Branch IPM Program PO Box 9377 Stn Prov Govt Victoria, BC V8W 9M6	
	Courier:	Ministry of Environment & Climate Change Strategy Environmental Protection Division Regional Operations Branch IPM Program 3rd Floor, 525 Superior Street Victoria, BC V8V 0C5	
☐ **I have questions about the application fees and would like a call-back for consultation**	**Name**		5
	Phone number *(999) 999-9999*		6