



# INTAKE FORM FOR SPECIAL USE PERMIT

Date: \_\_\_\_\_

## CLIENT INFORMATION

Name: \_\_\_\_\_  
Full Legal Name (Please PRINT)

Client #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Phone #: (h) \_\_\_\_\_ (w) \_\_\_\_\_ Fax: \_\_\_\_\_

### Proposed Use:

- a) Construction and maintenance of a road, including construction and maintenance of bridges and other drainage structures;
- b) sand pits, gravel pits, rock quarries and other quarries that provide materials for road construction, modification or maintenance authorised under the *Forest Act*;
- c) a communications site;
- d) a logging camp and associated facilities, including a waste disposal site (for refuse associated with the camp);
- e) a log dump or dry land sort;
- f) a temporary timber processing site;
- g) a lookout;
- h) a weather station;
- i) an airstrip, helipad or other air transportation landing site;
- j) education or research purposes;
- k) weigh scales;
- l) silviculture activities and associated camp facilities;
- m) wildlife habitat enhancement activities and associated camp facilities
- n) wood waste management site associated with remote log dumps and dry land sorts

Term: \_\_\_\_\_ (days/months/years)

Is this application associated with a Forest Tenure?  Yes  No  Unsure

**If yes, please identify the Forest Tenure #:** \_\_\_\_\_

Is this application within a high archaeological potential area?  Yes  No  Unsure

Has an archaeological assessment been done on this area?  Yes  No  Unsure

Has public or First Nations consultation/information sharing taken place?  Yes  No  Unsure

**If Yes, please attach results.**

Camp applications Only: Number of workers using camp? \_\_\_\_\_

Type of camp:  Logging  Tree Planting  Silviculture workers

**Proposed Water Source:** \_\_\_\_\_

Location: \_\_\_\_\_

UTMs \_\_\_\_\_

Please attach a map showing area of activities and an overview map (1:10,000 or 1:20,000 scale).

Please note: 1. ESF submission may be required

2. Management Plan that sets out how the land will be used is required

3. Security Deposit will be required

4. Special Use Permits are subject to property taxes

5. First Nations Consultation is required

6. Environmental Assessment may be required

7. Referrals

Department of Fisheries and Oceans

Ministry of Environment and Climate Change Strategy

Environmental Assessment Office

Forest, Lands, Natural Resource Operations and Rural Development

Other \_\_\_\_\_

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**Applicants Signature**

**CLIENT:** NEW  ACTIVE  OTHER

If New:

**BCDL or Birth Certificate**

**#:** \_\_\_\_\_

**Date of Birth:**

\_\_\_\_\_

# Management Plan

Include a description of proposed works, structures or site alteration proposed.

Provide a sketch or map of proposal and description of the area.

Area \_\_\_\_\_ ha. UTM: \_\_\_\_\_

Location: \_\_\_\_\_

Attach map.

Describe or attach the clean-up/closure plan.

Identify the required referrals for closure

- Department of Fisheries and Oceans
- Ministry of Environment and Climate Change Strategy
- Environmental Assessment Office
- Forest, Lands, Natural Resource Operations and Rural Development
- Other: \_\_\_\_\_