

6. I/We enclose:

Soil Deposit/Removal Application

410 Kinchant St, Quesnel, BC, V2J 7J5 T: 250-992-2111 | F: 250-992-1512 www.quesnel.ca

All deposit/removal of soil requires a permit except for the purpose of minor garden or yard landscaping that doesn't significantly alter the topography of the property, or if the deposit/removal of soil is associated with another City Permit

| 1. | I (name), | | |
|----|--|--|--|
| | of | | |
| | Hereby apply for a permit to: | | |
| | Remove soil from | | |
| | Deposit soil or other material on | | |
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| | | | |
| 2. | It is my intention to remove from or deposit soil or other material on the said property for the following purposes: | | |
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| 3. | Area from which soil is to be removed or depositedhectares. | | |
| 4. | The amount of soil to be removed or soil or other material to be placed iscubic metres. | | |
| 5. | Characteristics of the soil to be removed or soil or other material to be placed: | | |
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- a. The information requested as per Bylaw No. 1260; and
- b. The application fee as described in the current Comprehensive Fees and Charges Bylaw

I/We, hereby declare that all of the above statements and the information contained in the material submitted in support of this application are to be the best of my/our knowledge true and correct.

| | Signature of Applicant: | Date: | | | |
|--------------------------------|--|--|--|--|--|
| ٧ | here the applicant is not the property owner, the following must be signed by the registered owner: | | | | |
| | /We, the registered owner(s) of the above described property, and Deposit Permit and it is made with my/our consent and approval | n/are aware of this application for a Soil Removal and | | | |
| | Signature of Owner: | Date: | | | |
| | Signature of Owner: | Date: | | | |
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| Complete application received: | | | | | |
| Fee Receipt Number: | | | | | |
| | | | | | |
| D | Pate Considered by Council: | | | | |
| s | Status: (approval or Rejection): | | | | |
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