



Information Request

*Please Note: All information must be completed on this application form.
Incomplete information may cause delays or an inaccurate response.
Payment must also accompany this form.*

Applicant Name:

Tel:

Fax:

Email:

Mailing Address:

Property Owner (if different than above):

Subject Property Location:

Civic Address:

Town:

Nearest Intersection:

Lot:

Concession:

Reg. Plan:

Sub Lot:

Municipality:

Former Municipality:

Current Use:

Proposed Use:

Please Check the Applicable Box/Boxes:

- | | |
|---|----------|
| <input type="checkbox"/> Septic System Record Search - Image and Letter (10 business days, see box A) | \$110 |
| <input type="checkbox"/> Property Inquiry (10 business days, see box B) | \$290 |
| <input type="checkbox"/> Property Inquiry - Expedited Review (5 business days, see box B) | \$560 |
| <input type="checkbox"/> Data Request (see box B) | Variable |

Total Applicable Fee:

(A) Septic Permit Record Information (if applicable)

- Approximate date of sewage system installation: _____
- Owner at the time of installation or a list of previous owners _____
- **Please send completed forms to septic@nation.on.ca or return to SNC Office**

(B) Planning Property Review Documents/Information (if applicable)

- Cover letter with specific information requested/reason for review
- Site map and site plan showing distance from buildings, roads, watercourses, top of slope
- Property owner permission (if applicable) for active Conservation Authorities Act records
- **Please send completed forms to planning@nation.on.ca or return to SNC Office**

Signature

Date