



PERMIT # \_\_\_\_\_

**HALDIMAND COUNTY  
ENGINEERING SERVICES DIVISION**

53 Thorburn Street, Cayuga ONN0A1E0  
Phone: (905) 318-5932

**SITE ALTERATION PERMIT APPLICATION**

Date submitted: \_\_\_\_\_ Site Address \_\_\_\_\_

|   |  |
|---|--|
| <b>2025 Administration Fee:</b>                         | <b>\$263.00</b> (non-refundable)                     |
| <b>Road Damage Deposit Fee:</b>                         | <b>\$772.00</b> (refundable upon final inspection)   |
| <b>Security Deposit Fee:</b><br>(if agreement required) | <b>\$2,500.00</b> (refundable upon final inspection) |

**PROPERTY OWNER INFORMATION**

Name : \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

**APPLICANT INFORMATION**  
(If not the owner- must complete owners authorization)

Business Name: \_\_\_\_\_ Contact name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email: \_\_\_\_\_

**CONTRACTOR INFORMATION**  
(if more than one- add on separate piece of paper)

Business Name: \_\_\_\_\_ Contact name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email: \_\_\_\_\_

On Site Contact Name: \_\_\_\_\_ Phone Number : \_\_\_\_\_

Email: \_\_\_\_\_

## WORK LOCATION / DETAILS

Site Alteration Address: \_\_\_\_\_

Property Zoning \_\_\_\_\_  Confirmed by County Staff

Site Alteration Roll #: \_\_\_\_\_ Property Size: \_\_\_\_\_

Site Alteration Legal Description: \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ Proposed Completion Date: \_\_\_\_\_

## FILL DETAILS

Description of Fill (Soil/fill samples must be attached ) \_\_\_\_\_

Purpose of fill: \_\_\_\_\_

Details of what the fill is going to be used for (indicate height, width and depth of amount of fill, to be indicated on site map)

\_\_\_\_\_

Will the fill be leveled or graded? \_\_\_\_\_

Existing Use of Property: \_\_\_\_\_ Proposed Use of Property: \_\_\_\_\_

### Cubic Metres of Fill Being Added:

Under 100 Cubic Metres  Between 100 and 250 Cubic Metres  Over 250 Cubic Metres

Approximately how many dump truck loads \_\_\_\_\_

Haul Route Used: \_\_\_\_\_

\_\_\_\_\_

Location (address) that fill will be obtained from. All know locations must be disclosed

\_\_\_\_\_

Outside of County  Within County  Both

Registered owner of fill: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email: \_\_\_\_\_

Site Contact Person : \_\_\_\_\_

Site Contact Phone Number : \_\_\_\_\_ Email: \_\_\_\_\_

## SITE ALTERATION SITE PLAN

**Site Alteration Site Plan needs to include: Hand drawn acceptable**

- Property lines of the land and location on the property of the Site Alteration with dimensions;
- All existing storm sewers, ditches, swales, creeks, watercourses and wetlands on the land and on abutting lands and public roads;
- All woodlands on the site and of all easements and right of ways over, under, across or through the site;
- All existing buildings and driveways on the lands.
- Where fill will be dropped and the amounts (indicate height, width and depth of fill)
- Disclosure of any easements, hydro, rail or mine corridors, Conservation Authority regulated areas or Forestry areas

**Site Plan**



**NOTE:** Personal information contained on this form is collected pursuant to the Ontario Building Code Act and the Haldimand County On-Site Sewage Systems By-law and will be used for the purpose of reviewing this evaluation. Questions about this collection may be directed to the Chief Building Official at Haldimand County at 905-318-5932.