

**Mailing:**  
17250 Yonge Street, Box 147  
Newmarket, ON L3Y 6Z1  
**Delivery:**  
90 Bales Road East, Sharon



**Environmental Services**  
**Natural Heritage and Forestry**  
**Special Permit Application**  
**Forest Conservation Bylaw #2013-68**

**Branch Contact Info:**  
(905)830-4444  
(877) 464-9675  
Fax: (905) 895-3047  
email: permits@york.ca

*Please print clearly using black ink.*

APPLICANT INFORMATION	REGISTERED PROPERTY OWNER INFORMATION
Company: _____	Company: _____
Contact: _____	Contact: _____
Title: _____	Title: _____
Address: _____	Address: _____
City: _____ Prov: _____	City: _____ Prov: _____
Postal Code: _____	Postal Code: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____
Cell: _____	Cell: _____
Email: _____	Email: _____

**PROPERTY LOCATION INFORMATION**

Town/City: _____	Tax Roll Number: _____
Civic Address: _____	Legal Description: _____
Property Accessed from (Road): _____	
Located between Road: _____	And: _____

**PERMIT INFORMATION**

Is the property enrolled in the Conservation Land Tax Incentive Program (LTIP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the property enrolled in the Managed Forest Tax Incentive Program(MFTIP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a scoped environmental impact study supporting this application attached?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dates Required: From: _____	To: _____	

**TREE INJURY OR DESTRUCTION**

Area of proposed tree injury or destruction (ha): _____	
Reason for proposed tree injury or destruction: _____	
Description of proposed tree injury or destruction: _____	
Document Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	Map Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No

**AUTHORIZATION**

I acknowledge that I have received a copy of The Regional Municipality of York Forest Conservation Bylaw #2013-68 and that I have reviewed the content and requirements prior to submitting this application. I agree that I will not undertake any harvesting activity until a Special Permit has been issued. I also understand that under the authority of this bylaw and the Municipal Act 2001, an appointed officer can enter the described property for the purposes of undertaking an inspection.

Applicant's Signature: _____	Property Owner's Signature: _____
Date: _____	Date: _____

\*\* Where multiple individuals own the property, attach all signatures authorizing the permit application\*\*  
\*\*Applicable Permit Fees must be attached when submitted\*\*