



Mailing Address
PO Box 270 Bridgenorth
Ontario K0L 1H0

Tel: 705 292 9507
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www.selwyntownship.ca

Demolition Permit Application Checklist

This is not an application for demolition;
however, this documents must be
submitted with an application

Address of Building Demolition: _____

Building Area: _____ No. of Storeys: _____ Date of Demolition: _____

The owner shall notify and advise agencies such as Ontario One Call, County and /or Municipal Roads Department, Otonabee Conservation Authority and the Fire Department of their intent to demolish:

The Owner/Applicant shall bare the full responsibility to ensure all utilities in/to the above building have been disconnected prior to commencing demolition (minimum of 5 working days' notice).

If any building, to be demolished, is using propane gas (rural areas), the **Owner** shall also contact such company to disconnect tanks.

All waste materials generated from a demolition site shall be deposited at a waste site certified by the Ministry of Environment. This does not apply to inert fill, meaning earth, rock or waste of a similar nature, such as broken concrete, cement blocks and bricks that contain no putrescible, soluble or decomposable materials. The local District Office of the Ministry of Environment should be advised of sites chosen for disposal of inert fill.

If material is proposed to be disposed of at the Selwyn Landfill – It is your responsibility to ensure that 24 hours notice is provided and that any payment arrangements are made prior to arrival.

Call 705-292-9507 ext. 236 (Public Works).

Applicant: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Hauler Information

Same as above

Name: _____

Address: _____



Disposal Information

Category of Waste: (Select One)	<input type="checkbox"/>	Pre-approved	Including but not limited to C&D from Non-Industrial Sources, IC&I similar to curbside, yard waste from residential properties.
	<input type="checkbox"/>	Requiring written approval	Including but not limited to, Waste from Medical Facility, C&D from an Industrial Source (non-contaminated), Empty Containers/Drums.
	<input type="checkbox"/>	Requiring testing and written approval	Including but not limited to Industrial process wastes (sands, grindings, slags, sludge's, tailings, by-products of production), Railway Ties & Utility Poles, Excavated Wastes, Waste from a Waste Treatment Plant.
Tonnage to be Disposed: _____		Frequency of Disposal: _____	
Is this waste a "solid, non-hazardous waste" as defined by O.Reg 347?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Is this waste subject to the "Land Disposal Restrictions" under O.Reg 347?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Has this waste been mixed with or derived from a hazardous waste per O.Reg 347?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Has this waste been treated so that it is now a solid non-hazardous waste?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Intended Use of Waste Material:			Daily Cover <input type="checkbox"/> Waste <input type="checkbox"/>

Waste Acceptance Agreement

The customer understands and acknowledges that the waste material must be completely described and chemically characterized so that the waste can be handled properly and safely. The customer understands and acknowledges that the failure to properly describe the waste material could result in the need for the Township to incur expenses (e.g. administrative, professional, legal, regulatory penalties, fines, orders) in order to properly dispose of the waste and to comply with the applicable legislation. The customer agrees to indemnify the Township for all costs that arise from the misrepresentation of the waste material.

I hereby certify that the waste material to be deposited at the landfill site meets Ontario Regulation 347 (558/00) criteria as a solid, non-hazardous waste and that this waste was generated within the Township.

Note: the Medical Officer of Health and the Minister of the Environment may be consulted by the Chief Building Official to confirm compliance with applicable law.

Applicant's Declaration

I, _____, do hereby declare:
(confirm the following by checking)

- That I am the owner/authorized agent of the owner named in the above application for a permit.
- That the information supplied by me is the application and in the materials filed by me with the application is correct.
- That I have arranged/will arrange with the proper authorities for the termination and capping of all services.

And hereby certify conscientiously believing the above is correct.

Applicant's Signature

Date