



**COORDINATED
PROJECT REVIEW
Common Application Form**

LEAD AGENCY DETAILS

CPR NUMBER (to be added by FREMP):	PREVIOUS CPR NUMBER FOR THIS LOCATION: (if applicable)
PROPONENT:	
LEAD AGENCY(to be added by FREMP):	LEAD AGENCY FILE NUMBER:
Lead Agency Contact	Telephone Fax

PURPOSE OF APPLICATION: NEW RENEWAL AMENDMENT OTHER (SPECIFY) _____

<input type="checkbox"/> FORESHORE LEASE	<input type="checkbox"/> CONSTRUCTION APPROVAL
<input type="checkbox"/> USE / OCCUPY PERMIT	<input type="checkbox"/> OCEAN DISPOSAL
<input type="checkbox"/> DREDGING LICENCE	<input type="checkbox"/> FEDERAL FISHERIES ACT AUTHORIZATION
<input type="checkbox"/> MWLAP WASTE MANAGEMENT PERMIT	<input type="checkbox"/> MWLAP WATER LICENCE
<input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> NWPA APPROVAL

INFORMATION and/or ATTACHMENTS REQUIRED WITH ALL APPLICATIONS

THE FOLLOWING INFORMATION IS REQUIRED ON ALL PLANS. FAILURE TO PROVIDE ACCURATE AND COMPLETE INFORMATION WILL RESULT IN AN EXTENDED REVIEW PERIOD.

1. Electronic files or 5 Sets of STAMPED ENGINEERED DRAWINGS MUST ACCOMPANY THE APPLICATION.

These plans and engineered drawings must delineate the following information:

- **LEGAL HIGH WATER MARK (LHWM) or the NATURAL BOUNDARY ACCORDING TO PLAN # _____.**
 - The Legal High Water Mark (LHWM) is registered in the Land Titles Office (LTO) and can be obtained there or will be noted on your current Land Survey. Please note the LHWM is legally registered and should not be confused with the High Water Mark. The High Water Mark refers to tidal High Water only.
 - **This information must be delineated on all plans and stamped engineered drawings to identify jurisdictional authority.**
 - Any plans that do not show the LHWM or the “Natural Boundary According to Plan # _____,” will not be accepted by the FREMP Environmental Review Committee (ERC) and will be returned to proponent. This will result in a significant delay in reviewing the application and drawings for approval.
- **PROPOSED STRUCTURES**
- **EXISTING STRUCTURES**
- **STRUCTURES TO BE REMOVED**
- **STRUCTURAL DETAIL**
- **HIGHER HIGH WATER MARK AND LOWER LOW WATER MARK**
- **CROSS SECTIONAL VIEW WITH HIGHER HIGH AND LOWER LOW WATER MARKS**
- **LEASE BOUNDARIES**
- **LEASE DIMENSIONS (where tenure is applicable).**
- **INGRESS / EGRESS**
- **SET BACKS FROM PROPERTY LINE**
- **PROPERTY BOUNDARY**
- **SERVICES TO PROPERTY: WATER HYDRO SEWAGE**
- **DREDGE AREA BOUNDARIES**

2. FREMP HABITAT CLASSIFICATION MAP WITH LOCATION INDICATED can be obtained at the Fraser River Port Authority or on the Fraser River Estuary Management Program website at www.bieapfrempp.org.

3. RIPARIAN CONSENT: LETTER OF CONSENT / PROOF OF OWNERSHIP FROM THE OWNER OF PROPERTY.



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A. APPLICANT

Name			
Address			
		Postal Code	Email Address
Contact	Telephone	Cellular	Fax
Occupation		Company Incorporation No.	
Age 19 Years or over	<input type="checkbox"/> Yes <input type="checkbox"/> No	Canadian Citizen	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Resident in BC for 2 Years	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

B. APPLICANT'S REPRESENTATIVE (if different from above)

Name			
Address			
		Postal Code	Email Address
Contact	Telephone	Cellular	Fax

C. RIPARIAN OWNER

Name			
Address			
		Postal Code	Email Address
Contact	Telephone	Cellular	Fax

D. SURVEYOR

Name			
Contact	Telephone	Cellular	Fax

E. PROPOSED USE OF AREA ON COMPLETION OF WORKS

F. PROJECT LOCATION

Legal Description of Upland	Street Address	
		Habitat Classification (Colour Coding)
Municipality	GPS Coordinates (if available)	Area Designation for Site:

ACKNOWLEDGEMENT OF APPLICANT OR REPRESENTATIVE

I, _____, certify that all information contained herein is true to the best of my knowledge.
(PLEASE PRINT)

(Applicant or Representative's Signature)

DATE: _____

G. PROJECT DETAILS

DOES THE PROJECT...

Note: ITEMS BELOW MARKED WITH ASTERISK MAY REQUIRE A SEPARATE APPLICATION TO THE AGENCY INDICATED

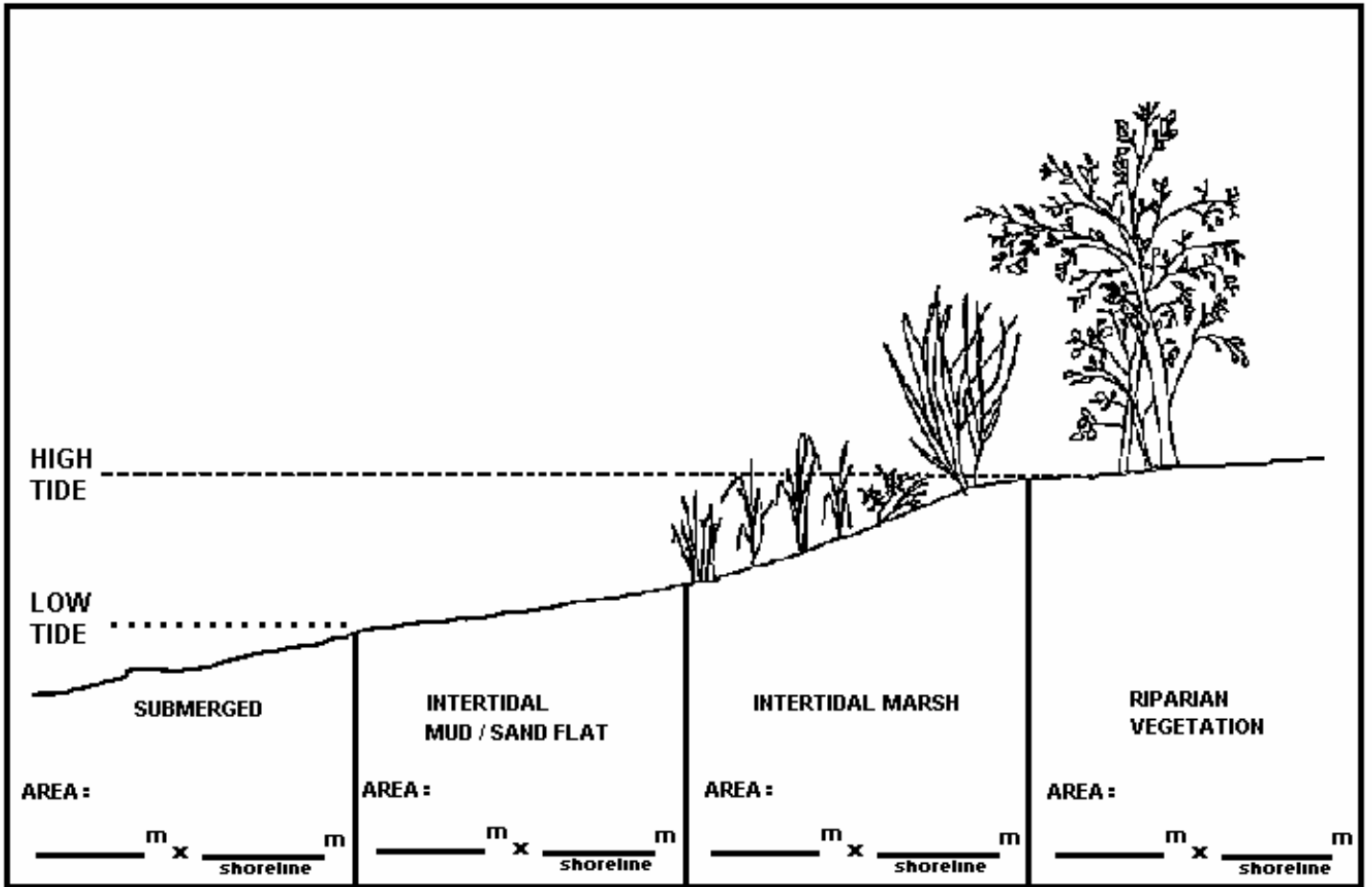
a)	Involve the construction of new structures or expansion/improvement of existing facilities? If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
b)	Involve demolition or removal and disposal of existing structures? If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
c)	Require municipal servicing? If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
d)	Involve moorage of float home(s) or liveboard vessels? If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
e)	Involve dyke construction or works on or in proximity to existing dykes? If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
f) *	Involve diversion or consumption of water? *(Land and Water BC Licence Application) If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
g)*	Generate wastes requiring disposal? *(MWLAP Waste Management Permit Application) If yes, describe type and quantity	<input type="checkbox"/> Yes <input type="checkbox"/> No
h)*	Involve use, production or handling of hazardous materials? *(MWLAP Waste Management Permit Application) If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
i)*	Involve lands which are included in the Site Registry established under Contaminated Sites legislation and administered by the B. C. Ministry of Water, Land and Air Protection (MWLAP)? If yes, provide relevant SITE number(s) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
j) *	Involve use or application of pesticides or herbicides? * (MWLAP Pesticide Permit Application) If yes, explain	<input type="checkbox"/> Yes <input type="checkbox"/> No
k)*	Involve Dredging and disposal of material? * If yes, Circle method of disposal <ul style="list-style-type: none"> • Upland Disposal - Dredging Licence required by the Port Authority • Ocean Disposal - DOE Ocean Disposal Permit Application required. Permit # _____ Valid Date: Copy to be sent to Port Authority 	<input type="checkbox"/> Yes <input type="checkbox"/> No
l)	Involve use of land in the Agricultural Land Reserve? Indicate Municipal or Regional district zoning.	<input type="checkbox"/> Yes <input type="checkbox"/> No

H. COMPLETE DESCRIPTION OF PROPOSED WORKS AND CONSTRUCTION METHODS (Attach sheet if additional space required)

Estimated Construction Costs	Proposed Commencement Date for Works	Proposed Completion Date for Work	Hours of Construction

I. DETAILS

Indicate the area affected using the diagram below as a guide to zones. Enter area affected in the appropriate space in the diagram.



DOES THIS PROJECT REQUIRE...

If any of the following apply to your project, make sure you have completed Section H appropriately.

- FILL** Area: _____ m x _____ m Volume: _____ m³
- DREDGING** Area: _____ m x _____ m Volume: _____ m³
- RIP RAP** Area: _____ m x _____ m Linear Shoreline Length: _____ m
- PILES** Number: _____ Type: _____

(ie. Steel, used creosote, concrete or green stick)

J. LOCATION MAP

Indicate the location of the project on the map on the following page. Please add any additional references, which will help to locate your project. (e.g. street names, landmarks, etc.)

If you have GPS coordinates for your project site, please include this information in Section F.

J. LOCATION MAP

Project Location

Please indicate the location of proposed works. Include any additional references which will help us to locate your project. (e.g. street names, landmarks, municipal boundaries, etc.)

Note: If your project is not within the grey shaded area, you are not in the FREMP boundaries.

