



# Application for a Certificate of Approval For a Waste Management System

FOR OFFICE  
USE ONLY File Ref. No. \_\_\_\_\_

## REGIONAL AND DISTRICT OFFICES

Mount Pearl (709) 729-2550  
Harbour Grace (709) 945-3106  
Clarenville (709) 466-4060  
Gander (709) 256-1420  
Grand Falls-Windsor (709) 292-4259  
Corner Brook (709) 637-2204  
Happy Valley-Goose Bay (709) 896-5428

To establish, alter, enlarge, or extend a waste management system (to accompany plans, specifications, and public notification as required by Section 78 of *The Environmental Protection Act*).

### System Information

1	Location of Proposed Waste Management System/Operation
	Type of Operation

### Size of Area to be Serviced

2	(a) Approximately _____ Persons	(c) Approximately _____ Kilometres of public road
	(b) Approximately _____ Square kilometres	Of any existing disposal facility _____ Metres x _____ Metres

### Distances

3	(a) From nearest approved waste disposal site	_____
	(b) From nearest public road	_____
	(c) From public road of access	_____
	(d) From nearest residence	_____
	(e) From nearest cemetery (if less than 1km)	_____
	(f) From nearest water course (stream, brook, etc.)	_____
	Name of stream, brook, etc. (if applicable)	_____
	(g) From nearest water body (pond, lake, etc.)	_____
	Name of pond, lake, etc. (if applicable)	_____
	(h) From proposed fence to vegetation line	_____
	Type of vegetation	_____
(i) From nearest aircraft runway or seaplane base (if less than 15km)	_____	
(j) From nearest hospital, place where food is prepared or stored, school, church, or other building used for human habitation other than residences	_____	
(k) From nearest source of public water supply (municipal watershed, dug well, reservoir, etc.)	_____	

### Vehicles and Accessory Equipment

4	(a) Number, size, and type of vehicles and/or equipment for collection purposes
	_____ _____ _____ _____
	(b) If applicable, list number, size and type of other equipment used
	_____ _____ _____ _____

**Vehicles and Accessory Equipment (continued)****4**

(c) If applicable, list number, size and type of equipment available for fire protection and fighting purposes ,

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(d) If applicable, provide dimensions and details of any proposed buildings

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**Construction Details for System Operations (if applicable)****5**

Width of tree screen that will be maintained

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Is the site presently visible to the public?

☐ Yes ☐ No

Total length of access road

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Width of any access road presently

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Proposed width of access road

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Proposed width of access road cleared right of way

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Steepest grade along access road

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Length and type of fencing to be used (material, mesh size, height, etc.)

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Width of fire break

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Average depth of cover material available

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 m (by soil tests

Number of test holes

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Depth of watertable below existing grade

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 m (by soil tests

Number of test holes

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Dimensions of any trenching to be provided

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**Relevant Dates****6**

Proposed date to commence operations

YYYY MM DD

If applicable, frequency of waste collection

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**Operational Details****7**

Estimate waste volume per year	
Hours of operation	
If applicable, please specify holding area for car wrecks and scrap metal	
Will your site receive waste from any of the following?	
Farm waste	<input type="checkbox"/> Yes <input type="checkbox"/> No
Septic tanks and/or sewage treatment plants	<input type="checkbox"/> Yes <input type="checkbox"/> No
Service stations and/or industry	<input type="checkbox"/> Yes <input type="checkbox"/> No
Medical, biological or laboratory waste	<input type="checkbox"/> Yes <input type="checkbox"/> No
Military facility	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other (specify) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you proposing to transport or dispose of international waste? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>(If yes, you must provide a copy of your valid approval from the Canadian Food Inspection Agency)</i>	

**Applicant Information****8**

Name	
Position	
Mailing Address	Postal Code
Date (YYYY MM DD)	

**Return completed application to one of the Government Service Centres listed below****9**

<b>MOUNT PEARL</b> Motor Registration Building P. O. Box 8700 St. John's, NL A1B 4J6 Telephone: (709) 729-2550 Facsimile: (709) 729-7400	<b>HARBOUR GRACE</b> 7-9 Roddick Crescent P. O. Box 512 Harbour Grace, NL A0A 2M0 Telephone: (709) 945-3107 Facsimile: (709) 945-3114	<b>CLARENVILLE</b> 8 Myers Avenue Clareville, NL A5A 1T5 Telephone: (709) 466-4060 Facsimile: (709) 466-4070	<b>GANDER</b> Fraser Mall P. O. Box 2222 Gander, NL A1V 2N9 Telephone: (709) 256-1430 Facsimile: (709) 256-1438
<b>GRAND FALLS-WINDSOR</b> 3 Cromer Avenue Grand Falls-Windsor, NL A2A 1W9 Telephone: (709) 292-4206 Facsimile: (709) 292-4528	<b>CORNER BROOK</b> Mount Bernard Avenue Sir Richard Squires Building Corner Brook, NL A2H 6J8 Telephone: (709) 637-2204 Facsimile: (709) 637-2681	<b>HAPPY VALLEY-GOOSE BAY</b> 2 Tenth Street P. O. Box 3014, Str. "B" Happy Valley-Goose Bay, NL A0P 1E0 Telephone: (709) 896-5428 Facsimile: (709) 896-4340	