

Application for Permit to Alter a Body of Water

As required under **Section 48** of the *Water Resources Act*, SNL 2002 c W-4.01

Application Checklist - The following information *must* accompany your application:

- ☐ **'Application for Permit to Alter a Body of Water'** (this form).
- ☐ **Schedules 'A' to 'J'** (as appropriate).
- ☐ **'Fee Schedule' and Application Fee Payment'** (or proof of payment). Fees can be paid by Credit Card to Central Cash (709)729-3044. An online fee payment option is also available – please refer to: <https://www.gov.nl.ca/pay-online/#water-resources>
- ☐ **Location map (1:50,000 scale), Google Earth Image, and/or UTM or Decimal Degree coordinates** indicating location of the proposed work.
- ☐ **Proof of Land Ownership** (e.g. legal survey, Crown Lands Approval, other)
- ☐ **Municipal Approval:** for proposed work that is within a municipal boundary, written confirmation is required indicating that the proposed work conforms with municipal zoning and that the work has been approved, approved conditionally, or that there are no objections to the proposed work before WRMD will issue a permit.
- ☐ **Groundwater Requirements:** for persons/companies/consultants developing unserviced residential developments of more than 4 lots, written confirmation is required indicating that the undertaking has met all groundwater requirements before WRMD will issue a permit.
- ☐ **Photos of the Site** prior to work being undertaken.

NOTES:

1. **Indigenous Consultation:** If the application is for work in Labrador the proponent must check with the [Office of Indigenous Relations and Reconciliation](#) to determine if Indigenous Consultation is required. If consultation is required, the consultation will be undertaken by the Water Resources Management Division. Applications will be considered incomplete until the Indigenous Consultation has been completed.
2. Completed Applications Forms may take 4 to 6 weeks from the Date Received for Review and Processing.
3. If you wish to meet with someone regarding your application, appointments are required to be made a minimum of 24 hours in advance to ensure availability.
4. Please be advised that, in accordance with Government's Proactive Disclosure Initiative, your permit will be posted online subject to any exceptions to disclosure provided under the *Access to Information and Protection of Privacy Act*, 2015.

Please mail completed Application Forms to:

**Department of Environment, Conservation and Climate Change
Water Resources Management Division
PO Box 8700, St. John's NL A1B 4J6**

Attention: Manager - Water Rights, Investigations and Modelling Section

Email: waterinvestigations@gov.nl.ca

Fax: 709-729-0320

If assistance is required in completing these forms, please call: **(709)729-1646**

Applicant/Consultant/Contractor Information (As applicable):

Name/Company/Agency: _____
Contact Person: _____
Address: Street/PO Box: _____
City/Town: _____
Province: _____ Postal Code: _____
Telephone No.: () _____ Fax No.: () _____
E-mail Address: _____

Owner Information: ☐ Same as above, or

Name/Company/Agency: _____
Contact Person: _____
Address: Street/PO Box: _____
City/Town: _____
Province: _____ Postal Code: _____
Telephone No.: () _____ Fax No.: () _____
E-mail Address: _____

Notes:

- Originals of the Permit will only be mailed to the “Owner”.
- A Copy of the Permit will be emailed to the “Applicant”.
- Permits will be posted on the Government webpage at:
<https://www.gov.nl.ca/eccc/waterres/permits-licenses/permits/water-alt/>

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Alteration Type:

Please select the Applicable Type(s) and attach completed Schedule(s) for each:

Type	Check	Required Schedule
Culvert	☐	Schedule A
Bridge	☐	Schedule B
Dam	☐	Schedule C
Fording	☐	Schedule D
Pipe Crossing/Water Intake	☐	Schedule E
Stream Modification or Diversion	☐	Schedule F
Pedestrian/ATV/Snowmobile Bridge	☐	Schedule G
Infilling, Dredging, Debris Removal	☐	Schedule H
Development in a Flood Risk Area	☐	Schedule I
Miscellaneous Works in a Freshwater Body i.e. other works not specific to above schedules	☐	Schedule J

Project Information:

Project Name: _____

Water Body Name: _____

Community Name: _____

Area (if outside a community): _____

Is this project located in a Protected Public Water Supply Area? Yes ☐ No ☐

Proposed Start Date: _____ **Estimated Completion Date:** _____

Reason(s) for the Proposed Work:

Date: _____

Signature: _____