Remediation (REM) Pre-Application Form

A Remediation application meeting with SCRD Planning is required in order to discuss non-permitted land alteration with you and your designated qualified professional. The meeting will establish the requirements to bring the subject property into compliance with SCRD Bylaws and Provincial Regulations.

You will find many of the required details for your parcel at the following locations:

SCRD Property Viewer Map found here: https://maps.scrd.ca/PropertyReports/

SCRD Zoning Bylaws and Official Community Plans can be found here: https://www.scrd.ca/Planning

What to expect

Technical staff will review the property information and other details provided within this form in advance of an initial meeting with you and your qualified professional. This form, along with supporting documents and payment of the REM fee, must be received by SCRD within 30 days of receiving your Bylaw notice.

REM Meeting Information Requirements

	Contact Name:				
	Contact Email:				- Staff Use
Parcel:	Parcel PID:				Stail 655
	 Zoning:	TCP A	TCP B	·	
Bylaw Fi	ile #:	_			
Owner:	Property Owner Name(s):				
Descript	ion of Land Alteration and Prop	osed Develop	ment:		
∆nnlicat	ion Type Proposed (select all th	at annly):			

Development Permit(s) **Zoning Amendment** Subdivision or Strata **OCP Amendment** Tree Cutting Permit **Development Variance Permit**

Board of Variance

Document Requirements:

Documents required for Remediation Meeting:

Certificate of Title <30 days old

Sketch or site plan: of proposed development showing location of buildings or structures, existing and proposed, Development Permit Areas including any mapped or unmapped creeks, wetlands, marine or freshwater shorelines, covenants, easements, Rights of Way.

Authorized Agent Form

email correspondence Ticket Number:

Staff Use

Before Moving Earth, Cutting Trees, working in or near water:

Your success and timeline is dependent on meeting requirements that are local, Provincial and Federal. Avoid extra costs, stop-work orders and visits from enforcement officers by:

- Contacting the appropriate First Nation for review. Indigenous governments and the Heritage Conservation Act of BC work to protect heritage that may not be known or visible to you or previous owners of the parcel.
- **Knowing the Timing Windows to Protect Species:** Provincial and Federal regulations determine when trees can be felled and when work in or near water can take place.
 - o Bird Nesting Window: BC Wildlife Act
 - o Work in or Near (fresh) Water: Water Sustainability Act
 - Work in or near any water that may impact fish, DFO
- Acquire and understand each of documents listed on the Certificate of Title

If email correspondence has guided the pre-application discussion, please provide the

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Applicant Acknowledgement	
To the best of my knowledge, the propose	is consistent with the property use, density, and siting regulations within the any nonconformance be discovered, the development permit application will
I / we hereby declare that all of the above support of this request for a Remediation	equirements and supporting documentation are accurate and submitted in neeting.
Date:	
Applicant Name:	Signature:
NOTE: if you are not the parcel owner,	e parcel owner must complete the Appointment of Agent form.
Staff Use:	
Pre-application Type(s):	Fee:
Staff Member Reviewing:	Meeting Date:



Planning and Development Division Sunshine Coast Regional District Fax: 604-885-7909

Email: planning@scrd.ca

Authorized Agent Form - Designation of Qualified Professional to Communicate with SCRD

TO:	Manager of Planning and Development, Sunshing	e Coast Regional District				
I.We,			(the "Regi	stered Owner")		
	(Legal name(s) appearing on the Title)					
Own the	ne lands described below and confirm the appointme	ent of:				
	(Enter legal name of consultant/corporation/individual appointed a	s Agent)				
	(Address of Agent)					
	(Telephone number of Agent)					
To act	as my/our agent with respect to all matters rela-	ting to planning permits a	and property informati	on requests fo		
			regarding land	ds described as		
	(Civic address of Property)					
	(Enter legal discription of Property)					
It is un	derstood, that:					
	 The Sunshine Coast Regional District shall dea pertaining to the matter described and is undo or any other person while this appointment re 	er no obligation to commu				
	2. The above-noted agent has the authority to make all necessary arrangements with the Sunshine Coast Regiona District, to perform all matters and to take all necessary proceedings with respect to the matter described; and					
	3. A written letter from the Registered Owner(s)	or their Authorized Agent	is required to cancel thi	s appointment.		
Dated	l at(Enter place where form executed)	, this	day of	, 202		
	(Enter place where form executed)					
	(Signature)	(Print Name and Title)				
	(Signature)	(Print Name and Title)				
	(Signature of Registered Owner(s) or Authorized Signatory for Own document. Electronic signatures are only acceptable if accompanie		n. Please note that ALL legal own	ners must sign this		
	(Name of Owner Corporation or Strata Corporation)					
	(Address)					
	(Telephone number of Registered Owner or Authorized Signatory fo	or Owner Corporation or Strata Corpo	oration)			