

Access Agreement Application

Application for access through municipal property:

Street address:

Phone number:

OFFICE USE ONLY

To be completed after the application has been reviewed by Parks, Forestry and Horticulture Operations.

| Agreement number: | Receipt number: |
|---|------------------|
| | Date (yy/mm/dd): |
| Processing: ^{\$} 150 (plus applicable taxes) | Received by: |
| Method of payment for processing administration fee: | |
| Check List: | |

| | Application | (includes \$ | 150 | non-refundable | processing | fee, | plus | applicable | taxes) |
|--|-------------|--------------|-----|----------------|------------|------|------|------------|--------|
|--|-------------|--------------|-----|----------------|------------|------|------|------------|--------|

Plan/description of work to be performed

- Map with highlighted route/path to be accessed
- Restoration plan
- Equipment/vehicles being used
- Time frame for expected work to be completed

Certificate of insurance in the amount of not less than \$2 million.

Certified cheque with contact information on front of cheque (Amount to be determined after site inspection by supervisor)

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The personal information on this form is collected under By-law #185-2007 and will be used for the purposes of this application only. This application may contain personal information as defined under the Municipal Freedom of Information and Protection of Privacy Act. This information is collected under By-law #185-2007. This information will be used to process this application and for administrative purposes related to this by-law. Questions related to the collection of this information should be directed to the Municipal Freedom of Information and Protection of Privacy Act Coordinator, 2100 Major Mackenzie Dr., Vaughan, ON L6A 1T1, 905-832-8504 ext. 6142.

RESIDENTIAL APPLICATION INSTRUCTIONS

- Application form to be completed by applicant. Print CLEARLY. A non-refundable processing fee of \$150 (plus applicable taxes) to be included at time of submission.
- 2. Provide a plan/description of work being completed. Be sure to include:
 - Map with highlighted route/path to be accessed
 - A plan for restoration
 - A list of equipment/vehicles to be used
 - Time frame for expected work to be completed
- 3. Application process is a minimum of seven working days for initial inspections to be completed.
- 4. The Park Supervisor and Forestry Supervisor will inspect the route and identify an amount of securities to be held. Security amounts are determined based on City assets that may be affected. Applicant will be advised of amount via email prior to the signing of agreement.
- 5. PLEASE NOTE: The supervisors reserve the right to deny the application and shall provide justification.

Application Number:

- 6. ONLY certified cheques or Letters of Credit will be accepted for security retention and are to be made payable to the Treasurer, City of Vaughan. Cheques must reflect the name on the agreement. They must be delivered to the Parks, Forestry and Horiculture Operations department located at the Joint Operations Center, 2800 Rutherford Road, Vaughan, ON L4K 2N9.
- 7. Upon completion of site restoration, notification must be given via email to Parks, Forestry and Horticulture Operations.
- 8. Site inspection will be conducted within seven working days of notification of site restoration by either/or the Parks and Forestry Supervisor(s).
- Should there be no deficiencies, the Finance department will be notified and a cheque/Letter of Credit will be released.



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| RESIDENTIAL: APPLICANT / AGENT INFOR | PLEASE PRINT CLEARLY | | |
|--|-------------------------------|-------------|--|
| MUNICIPAL PROPERTY ADDRESS (Include 911 numbers for rural location): | | | |
| STREET NUMBER AND NAME | | | |
| APPLICANT / AGENT NAME: | | | |
| MAILING ADDRESS: | | | |
| STREET NUMBER AND NAME | СПТҮ | POSTAL CODE | |
| TELEPHONE: | | | |
| HOME | WORK | | |
| EMAIL ADDRESS: | FAX: | | |
| NAME OF REGISTERED HOMEOWNER (if different from above): | | | |
| PHONE NUMBER OF REGISTERED HOMEOWNER: | | | |
| MAILING ADDRESS OF HOMEOWNER (if different from above): | | | |
| PROVIDE THE FILE NUMBER OF ANY TYPES OF CURRENTLY SUBMITTED I | DEVELOPMENT APPLICATIONS: | | |
| No Current Applications: | Driveway Widening / Curb Cut: | | |
| Official Plan / Rezoning | Subdivision: | | |
| Building Permit: | Site Plan: | | |
| Pool Permit: | Committee of Adjustment: | | |

DECLARATION

Land Division:

I hereby declare that the statements made by me upon this application are, to the best of my belief and knowledge, a true and complete representation of the purpose and intent of this application and authorize City of Vaughan staff to enter the property for inspection purposes for processing this application.

Topsoil Removal Permit:

| Signed at the City of Vaughan this | day of | , 20 | |
|------------------------------------|--------|------|--|
| | | | |
| SIGNATURE OF APPLICANT: | | | |
| | | | |
| PLEASE PRINT NAME: | | | |