Planning & Public Works
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Toll Free: 1-866-4HALTON (1-866-442-5866)
www.halton.ca

Environmental Site-Screening Questionnaire

Legal/Municipal Address 759 Maple Avenue, Burlington **Applicant:** Grant Burlie

1.	Was the subject property ever used for industrial purposes?	yes	no	uncertain
2.	Was the subject property ever used for commercial purposes that may have caused contamination (e.g. gasoline station, dry cleaners, etc.)	yes	no	uncertain
3.	Has fill ever been placed on the property?	yes	no	uncertain
4.	Is there any reason to believe that the subject property is potentially contaminated based on historic use of the property or a neighbouring lot located within 100m of the property?	yes	no	uncertain
5.	Are there or were there ever any above-ground or underground storage tanks or waste disposal activities on the property?	yes	no	uncertain
6.	For existing or previous buildings on the property, are there building materials that may be potentially hazardous to human health (i.e. asbestos, lead-based paints, etc.)?	yes	no	uncertain
7.	For agricultural properties, were pesticides or herbicides ever applied to the property?	yes	no	uncertain
8.	Have any of the buildings on the property been heated by fuel oil?	yes	no	uncertain
9.	Is the land use changing to a more sensitive land use (e.g. industrial/ commercial to residential/institutional)? Note: Daycare uses are defined in O.Reg.153/04 as institutional.	yes	no	uncertain

General Information:

1.	Have any environmental documents (e.g. Phase I and II Environmental Site Assessments, Records of Site Condition, etc) ever been prepared for the property? If yes, please submit these documents in digital and hardcopy format with your application together with a letter of reliance granting third party reliance on the documents to the Region of Halton.	yes	no

Certification

I, Grant Burlie _____ am the registered owner of the land that is the subject of this document and to the best of my knowledge, the information provided in this questionnaire is true.

Sworn (or declared) and stamped before me _____
Commissioner of Oaths (Print Name)

in the _____ , this _____ day of _____ 20____
City/Town/Municipality Day Month Year

_____ Grant Burlie _____
Commissioner of Oaths (Signature) Registered Owner (Signature)

Regional File #: _____ Local Municipal File #: _____