

Section A

For Use by Metrolinx	
Application number:	Permit number (if different):
Date received:	Date completeness check finished:

To be completed by the Applicant

A. Project Information			
Project Name:			
Project Address (number and street name)		Unit number	Lot/con
Municipality	Postal Code	Province	Plan number/other description
Project Status: <input type="checkbox"/> Design <input type="checkbox"/> Tender <input type="checkbox"/> Under Construction			
Has an MCR / ICU Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Permit Number:	
<input type="checkbox"/> Short Stream <input type="checkbox"/> Full Stream if applicable			

B. Project Type (check all that apply)			
<input type="checkbox"/> Underground Utility within Municipal ROW	<input type="checkbox"/> Underground Utility on Private Property	<input type="checkbox"/> Overhead Utility within Municipal ROW	<input type="checkbox"/> Overhead Utility on Private Property
<input type="checkbox"/> Public Roadwork	<input type="checkbox"/> Public Curbs, sidewalks and streetscaping	<input type="checkbox"/> Roadwork on Private Property	<input type="checkbox"/> Other
Is the proposed project being carried out in response to a Metrolinx issued Notice pursuant to Section 46 of the BTFA? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, attach a copy Metrolinx issued Notice to this application)			
Tentative Construction Start Date		Tentative Construction Finish Date	

C. Applicant		
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner		
Last Name	First Name	Corporation or partnership
Street Address		Unit number Lot/con
Municipality		Province Postal Code
Telephone number	Cell number	E-mail

D. Owner (if different from Applicant)			
Last Name		First Name	Corporation or partnership
Street Address		Unit number	Lot/con
Municipality		Province	Postal Code
Telephone number	Cell number	E-mail	

Section B
To be completed by the Applicant

E. Checklist
<p>Applicant shall submit the required information to allow for an assessment of potential impacts on the Priority Transit Projects. The extent of supporting information required will depend on a variety of factors, including the nature of the proposed work, specifically their proximity to Metrolinx Infrastructure, whether existing, planned, or under construction. Please refer to the Metrolinx Corridor Development Permit Guideline for Utility and Roadway Work for more information, including an overview of the review & approval process, timing, agreements with Metrolinx, technical requirements, and more.</p> <p>Incomplete applications will be returned to the Applicant.</p> <p>A Utility and Roadway Application shall include the items indicated below:</p> <ul style="list-style-type: none"> • Cover Letter; • Completed Application Form with list of attached drawings, reports, studies, or documents; • Drawings & Surveys, as available and applicable to the proposed work; and • Reports, as applicable to the proposed work. <p>All on USB drive in PDF and CAD (AutoCAD or Microstation) formats. Hard copies will only be required upon request from Metrolinx.</p>

Submission Requirements (include as applicable to type of work proposed)					
Item No.	Item	Guideline Appendix A Clause	Notes	Submitted with Application	Item not yet available
1	Plan Drawings (CAD and PDF) or Sketch showing location, addresses and north arrow	<u>1.4(a)</u>	Showing location of work and horizontal clearances to Metrolinx Infrastructure and other infrastructure. Also show locations of hoarding, barriers, barricades and stockpiling, as applicable. Sketches may only be used in simple, straight forward works or in emergency situations.	<input type="checkbox"/>	<input type="checkbox"/>
2	Cross-Section Drawings (CAD and PDF)	<u>1.4(a)</u>	Showing location of work and vertical clearances to Metrolinx Infrastructure and other infrastructure.	<input type="checkbox"/>	<input type="checkbox"/>
3	DMOG base maps, where available, or surveyed maps	<u>1.4(a)</u>	As available	<input type="checkbox"/>	<input type="checkbox"/>
4	Pre/Post Construction Condition Survey	<u>1.4(b)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
5	Construction Management Plan	<u>1.4(c)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
6	Demolition Work Plan	<u>1.4(d)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
7	Hoarding and Stockpiling of Materials Plan	<u>1.4(e)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>

Submission Requirements (include as applicable to type of work proposed)

Item No.	Item	Guideline Appendix A Clause	Notes	Submitted with Application	Item not yet available
8	Excavations, Shoring & Tie-Back Plan	<u>1.4(f)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
9	Site Maintenance and Environmental Management Plan	<u>1.4(g)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
10	Ground Instrumentation and Monitoring Plan (GIMP)	<u>1.4(h)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
11	Crane Swing Plan	<u>1.4(i)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
12	Construction Barriers and Barricades Plan	<u>1.4(j)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
13	Overhead Protection Plan	<u>1.4(k)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
14	Construction Equipment Orientation/ Shielding Plan	<u>1.4(l)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
15	Safety Work Plan	<u>1.4(m)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
16	Quality Work Plan	<u>1.4(m)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
17	Risk Assessment Work Plan	<u>1.4(m)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
18	Site Reviews, Construction Monitoring, and Communications Plans	<u>1.4(n)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
19	Storm Water Management Study	<u>1.5(a)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
20	Traffic and Transit Management Study	<u>1.5(b)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>
21	Structural, Dewatering and Geotechnical Engineering reports	<u>1.5(c)</u>	If deemed applicable, at Metrolinx's discretion	<input type="checkbox"/>	<input type="checkbox"/>

Section C

To be completed by the Applicant

F. Transmitted Information

Documents Submitted (list each drawing and report, with version number and date)

This set of documents should match the set of documents submitted to the Municipality for Permit.

G. Application Declaration

I, _____ solemnly declare that I am *(choose one of the following)*:

- Owner
- An Agent of the Owner

and that all above statements contained within this application are true and accurate and subject to FOI (Freedom of Information) – Public Document.

Applicant Signature

Date