



March 2011

DURHAM YORK ENERGY CENTRE

Application for a Certificate of Approval (Waste Disposal Site)

Submitted to:

Ontario Ministry of the Environment
Director Section 27
Environmental Assessment and Approvals Branch
2 St. Clair Avenue West, Floor 12A
Toronto, Ontario
M4V 1L5

REPORT

Report Number: 10-1151-0343 (5000)





DURHAM YORK ENERGY CENTRE APPLICATION FOR A CERTIFICATE OF APPROVAL (WASTE DISPOSAL SITE)

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APPLICATION FORM

Certificate of Approval (Waste Disposal Site)

The Regional Municipality of Durham

General Information and Instructions

General:

Information requested in this form is collected under the authority of the *Environmental Protection Act*, R.S.O. 1990 (EPA) and the *Environmental Bill of Rights*, C. 28, Statutes of Ontario, 1993, (EBR) and will be used to evaluate applications for approval of waste disposal sites under Section 27, EPA. Questions about this collection of information should be directed to: Information Unit Supervisor, Environmental Assessment and Approvals Branch, 2 St. Clair Ave. W, Floor 12A, Toronto ON M4V 1L5. Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions:

1. **Applicants are responsible for ensuring that they complete the most recent application form.** When completing this form, please refer to the following guidance material: the "Guide for Applying for Certificate of Approval of Waste Disposal Sites, Section 27, 30, 31 and 32, EPA," (referred to as the Guide) and "Guide - Application Cost for Waste Management, S. 27, EPA". Application forms and supporting documentation are available from the Environmental Assessment and Approvals Branch toll free at 1-800-461-6290 (locally at 416-314-8001), from your local District Office of the Ministry of the Environment, and in the "Publications" section of the Ministry of the Environment website at <http://www.ene.gov.on.ca/envision/gp/index.htm#disposal>.
2. Questions regarding completion and submission of this application should be directed to the Environmental Assessment and Approvals Branch, 2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5, telephone number 1-800-461-6290 or (416) 314-8001, or to your local District Office of the Ministry of the Environment.
3. A complete application consists of:
 - 1) a completed and signed application form;
 - 2) all required supporting information identified in this form, the guidance material, and
 - 3) a certified cheque, money order or credit card payment, in Canadian funds, made payable to the *Ontario Minister of Finance* for the applicable application fee.

This form must be completed with respect to all requirements identified in the guidance material in order for it to be considered an application for approval.

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT. The Ministry may require additional information during the technical review of any application initially accepted as complete.

4. The original application, along with the supporting information and the application fee, must be sent to:

**The Ministry of the Environment,
Director, Environmental Assessment and Approvals Branch, Section 27
2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5**

A copy of the application and the supporting information must be sent to the local Ministry District Office which has jurisdiction over the area where the facilities are located. To locate the appropriate local Ministry District Office, please visit the Ministry of the Environment Internet site at: www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist.

A copy of the application and the supporting information must also be sent to the local municipality (unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality). Copies shall be provided to both the upper and lower tier municipality if applicable to the area where this facility is located.

A cover letter addressed to the Director of Environmental Assessment and Approvals Branch should accompany both submissions and indicate that a copy of the complete submission has been sent to the local District Office and local municipality(s).

5. Information contained in this application is not considered confidential and will be made available to the public upon request. Information submitted as supporting information may be claimed as confidential but will be subject to the *Freedom of Information and Protection of Privacy Act* (FOIPPA) and *EBR*. If you do not claim confidentiality at the time of submitting the information, the Ministry may make the information available to the public without further notice to you.
6. The electronic version of this form incorporates several features to assist you with completing your application. The form will calculate certain values based on the information you enter and will assist you in ensuring that all required information is included with your application. This form has been save-enabled; you can save a copy of this form that includes any information you have entered. You are encouraged to use the electronic version of this form, available on the Ministry of the Environment website at: <http://www.ene.gov.on.ca/envision/gp/4181e.pdf>.

Application for a Provisional Certificate of Approval for a Waste Disposal Site

Ce formulaire est disponible en français

For Office Use Only			
Reference Number	Payment Received \$	Date (y/m/d)	Initials

Form ID: 180043

Application Summary

Applicant Name *(legal name of individual or organization as evidenced by legal documents)*
The Regional Municipality of Durham

Project Name *(Project identifier to be used as a reference in correspondence)*
Durham York Energy Centre

Project Description Summary *(If EBR is applicable, this summary will be used in the EBR posting notice)*
 An Energy from Waste Facility is proposed to be constructed and operated on vacant land located on a 12.1 hectare property located in the Clarington Energy Business Park on the west side of Osbourne Road in the Regional Municipality of Durham. The facility will function to receive and thermally process municipal solid waste generated in the Regions of Durham and York. The energy content in the form of superheated steam will be used to generate electricity and potentially provide district heating. The hours of operation are 24 hours per day, 7 days per week, 365 days per year. The Facility meets all applicable air, noise waste and water environmental requirements under the Province of Ontario.

Required Information	Completed (yes or no)
<input checked="" type="checkbox"/> Project Name & Description	Yes
<input checked="" type="checkbox"/> Section 1: Applicant Information	Yes
<input checked="" type="checkbox"/> Section 2: Project Information	Yes
<input checked="" type="checkbox"/> Section 3: Site Information	Yes
<input checked="" type="checkbox"/> Section 4: Facility Information	Yes
<input checked="" type="checkbox"/> Section 5: Regulatory Requirements	Yes
<input checked="" type="checkbox"/> Section 6: Supporting Information	Yes
<input checked="" type="checkbox"/> Payment Information Section	Yes

Application Status: **FORM COMPLETE.** [Print Completed Form](#)

Cost Summary:

Administrative processing <i>(required for most applications)</i>	\$ 200.00
Hearing <i>(if mandatory or necessary)</i>	\$ 0.00

Review of Application	\$ 42,000.00
TOTAL COST	\$ 42,200.00

Section 1: Applicant Information

Form ID: 1133361

1.1 Applicant Information *(Owner of works/facility)*

Applicant Name <i>(legal name of individual or organization as evidenced by legal documents)</i>		Business Identification Number
The Regional Municipality of Durham		
Business Name <i>(the name under which the entity is operating or trading - also referred to as trade name)</i>		<input checked="" type="checkbox"/> same as Applicant Name
The Regional Municipality of Durham		
Applicant Type:	North American Industry Classification System (NAICS) Code	
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Federal Government <input checked="" type="checkbox"/> Municipal Government <input type="checkbox"/> Provincial Government <input type="checkbox"/> Other <i>(describe):</i>	562210 Waste Treatment and Disposal
Business Activity Description <i>(a description of the business endeavour, this may include products sold, services provided or machinery/equipment used, etc.)</i>		
Waste Treatment and Disposal		

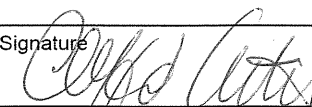
1.2 Applicant Physical Address

Civic Address- Street information <i>(includes street number, name, type and direction)</i>				Unit Identifier <i>(i.e. apartment number)</i>	
605 Rossland Road East					
Survey Address <i>(Not required if Street Information is provided)</i>	Lot	Conc.	Part	Reference Plan	
Municipality /Unorganized Township	County/District	Province/State	Country	Postal Code	
Whitby	Region of durham	Ontario	Canada	L1N 6A3	
Telephone Number <i>(include area code & ext.)</i>	Fax Number <i>(include area code)</i>	Mobile Number <i>(include area code)</i>	E-mail Address		
(905)668-7711 ext.					
Geo Reference <i>(southwest corner of property)</i>					
Map Datum	Zone	Accuracy Estimate	Geo Referencing Method	UTM Easting	UTM Northing
NAD83	17	+/- 5m	Aerial Photo	665414	4862615

1.3 Applicant Mailing Address

Same as Applicant Physical Address? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, please provide site address information below)</i>	
Civic Address - Street information <i>(civic numbering and street information including street number, name, type and direction)</i>	
605 Rossland Road East	
Delivery Designator	Delivery Identifier
Municipality	Province/State
Whitby	Ontario
Country	Postal Code
Canada	L1N 6A3

1.4 Statement of Applicant

I, the undersigned hereby declare that, to the best of my knowledge:		
<ul style="list-style-type: none"> The information contained herein and the information submitted in support of this application is complete and accurate in every way and I am aware of the penalties against providing false information as per s. 184(2) of the <i>Environmental Protection Act</i>. The Project Technical Information Contact identified in this form is authorized to act on my behalf for the purpose of obtaining approval under Section 27 of the EPA for the waste disposal site identified herein. I have used the most recent application form, as obtained from the Ministry of the Environment Internet site at http://www.ene.gov.on.ca/en/publications/forms/index.php#PartWaste or the Environmental Assessment and Approvals Branch at 1-800-461-6290. 		
Name of Signing Authority <i>(please print)</i>	Title	
Cliff Curtis	Commissioner of Works	
Telephone Number <i>(including area code & extension)</i>	Fax Number <i>(including area code)</i>	E-mail Address
(905)668-7711 ext.		
Mobile Number <i>(including area code)</i>	Signature	Date (y/m/d)
		2011/02/22

Section 2: Project Information

Form ID: 180043

2.1 Application Type

Type of Application:	
<input checked="" type="checkbox"/> New Certificate of Approval	<input type="checkbox"/> New Comprehensive Certificate of Approval
<input type="checkbox"/> Amendment to Current Certificate of Approval	<input type="checkbox"/> Convert Existing Approval to Comprehensive Certificate of Approval
<input type="checkbox"/> Administrative Amendment to Current Certificate of Approval	<input type="checkbox"/> Revocation
<input type="checkbox"/> Compliance with Conditions of the Existing Approval	
Is this a submission for Preliminary Review of your application?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, the application must be complete and finalized before you submit it for Preliminary Review.</i>	
Application Initiated by:	
<input checked="" type="checkbox"/> Proponent	<input type="checkbox"/> Environmental Assessment and Approvals Branch
<input type="checkbox"/> Provincial Officer Order (attach copy)	<input type="checkbox"/> Other (specify): _____
Current Certificate of Approval	
Certificate of Approval Number	Certificate of Approval Date of Issue (yyyy/mm/dd)
_____	_____
Project Schedule	
Estimated date for start of construction/installation (yyyy/mm/dd)	Estimated date for start of operation (yyyy/mm/dd)
2011/06/01	2014/01/01
Comprehensive Certificate of Approval – Eligibility Screening Questionnaire	
Screening Result: You are not required to complete the screening questionnaire	

2.2 Project Technical Information Contact

Name of Project Technical Information Contact		Company	
Samuel S. Joshi		Covanta Energy Corporation	
Telephone Number (include area code & ext.)	Fax Number (include area code)	Mobile Number (include area code)	E-mail Address
(862)345-5064 ext.	(862)345-5210	(862)485-7438	SJoshi@covantaenergy.com
Address Information:			
Same as Applicant Mailing Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide technical information contact address information below)			
Civic Address - Street information (civic numbering and street information including street number, name, type and direction)			Unit Identifier (i.e. apartment number)
445 South Street			
Delivery Designator	Delivery Identifier	Postal Station	
Municipality /Unorganized Township	Province/State	Country	Postal Code
Morristown	New jersey	USA	07960

Section 3: Site Information

3.1 Site Address - (location where activity/works applied for is to take place)

Same as Applicant Physical Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide site address information below)					
Civic Address- Street information (includes street number, name, type and direction) 72 Osbourne Road					Unit Identifier (i.e. apartment number)
Survey Address (Legal description of the site)	Lot 27	Conc. Broken Front	Part 1	Reference Plan 40R-26782	
Municipality /Unorganized Township Municipality of Clarington		County/District Region of durham		Postal Code L1E 2R2	
Non Address Information (includes any additional information to clarify applicants' physical location)					
Map Datum NAD83	Zone 17	Geo Reference (southwest corner of property) Accuracy Estimate +/- 5m	Geo Referencing Method Firstbase map	UTM Easting 680425.041	UTM Northing 4860195.229

3.2 Site Information - (location where activity/works applied for is to take place)

Site Name Durham York Energy Centre	MOE District Office York-Durham District Office
Is the site (property) that is the subject of this application owned by the Applicant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, please attach the owner's name, address and a signed letter granting consent for the installation and operation of the facilities</i>	
Is the Applicant the operating authority of the site that is the subject of this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If no, please attach the operating authority name, address and phone number</i>	
Is the Site located in an area of development control as defined by the Niagara Escarpment Planning & Development Act (NEPDA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, please attach a copy of the NEPDA permit for proposed activity/work</i>	
Is the Site located on the Oak Ridges Moraine Conservation Area as defined by the Oak Ridges Moraine Conservation Plan (ORMCP), a regulation made under the Oak Ridges Moraine Conservation Act (ORMCA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, please attach proof of Municipal planning approval for the proposed activity/work</i>	

3.3 Site Zoning and Classification

Present Land Use Vacant	Present Official Plan Designation Urban System - Employment Area	Present Zoning Category Energy Park General Industrial
Adjacent Land Use (select all that apply) <input checked="" type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Other(specify): _____		
Does the site currently have proper zoning for the proposed facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Has this facility been identified as part of the Official Plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has the Applicant received municipal zoning confirmation? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please attach correspondence from the municipality</i>		

Section 4: Facility Information

Form ID: 180043

4.1 Facility Description (information on the nature of the proposed business or activity at this site)

Type of Facility / Operation (select all that apply & complete all appropriate sections)

Landfill Transfer Processing Thermal Treatment Facility Household Hazardous Waste
 Closed Landfill Composting

Days and Hours of Operation: **365 days /year, 24 hours/day** Population Served by this Site (#): **1,800,000** Service Area: **Regions of Durham and York** Total Area of Site (hectares): **12.10**

Monitoring (select all that apply)

Groundwater Surface Water Landfill Gas Leachate None Other(specify): Air

Type(s) of Waste to be Accepted at this Site (select all that apply)

Municipal Waste Hazardous Waste Liquid Industrial Waste Other Liquid Waste

Municipal Waste Categories to be Accepted at this Site (select all that apply)

All Categories Domestic Sources IC&I sources Source Separated Organics Tires Leaf & Yard Waste
 Contaminated Soil Wood Waste Blue Box Materials Other(specify): _____

Other Liquid Waste Categories to be Accepted at this Site (select all that apply)

Processed Organics Waste from Food Processing / Preparation Operations Hauled Sewage Other(specify): _____

Hazardous / Liquid Industrial Waste Types to be Accepted at this Site

Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code

4.2 Other Approvals for Facility – Please attach a separate list if more space is required

Separate list attached? Yes No

List all other environmental approvals/permits applied for related to this project or received in relation to this project under the *Environmental Protection Act* (discharges to air, waste management, etc.) and the *Ontario Water Resources Act* (water and sewage works).

Approval Type	Approval Number	Approval or Application Date (yyyy/mm/dd)	Approval Type	Approval Number	Approval or Application Date (yyyy/mm/dd)
Air & Noise (EPA s.9)					
Sewage Works (OWRA s.53)					

4.3 Waste Transfer and/or Processing – Complete this information if waste transfer and/or processing take place at this facility.

Waste Types to be Transferred or Processed

Hazardous waste or liquid industrial waste ≤ 100 tonnes per day > 100 tonnes per day
 Waste other than hazardous waste and liquid industrial waste ≤ 100 tonnes per day > 100 tonnes per day

You are not required to complete section 4.3.

Liquid Waste

Maximum Storage Capacity (m ³)			Maximum Residual for Final Disposal (m ³)					
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Liquid Industrial		Other Liquid Waste	
			Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)		Maximum Residual for Final Disposal (tonnes)			
Hazardous	Non-Hazardous	Hazardous		Non-Hazardous	
		Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-Hazardous

Change to Operations

No change proposed Change does not require fundamental design review Change requires fundamental design review



4.4 Thermal Treatment Facility – Complete this information if thermal treatment takes place at this facility

Waste Types for Thermal Treatment				Design Capacity					
<input type="checkbox"/>	Hazardous waste or liquid industrial waste		<input type="checkbox"/>	≤ 100 tonnes per day		<input type="checkbox"/>	> 100 tonnes per day		
<input checked="" type="checkbox"/>	Waste other than hazardous waste and liquid industrial waste		<input type="checkbox"/>	≤ 100 tonnes per day		<input checked="" type="checkbox"/>	> 100 tonnes per day		
Liquid Waste									
Maximum Storage Capacity (m ³)			Maximum Residual for Final Disposal (m ³)						
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Liquid Industrial		Other Liquid Waste		
			Daily	Annually	Daily	Annually	Daily	Annually	
Solid Waste									
Maximum Storage Capacity (tonnes)				Maximum Residual for Final Disposal (tonnes)					
Hazardous		Non-Hazardous		Hazardous		Non-Hazardous			
				Daily	Annually	Daily	Annually		
		4,380.00				400.00	56,000.00		
Maximum Amount of Waste to be Received Daily									
Liquid (m ³)			Solid (tonnes)						
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Non-Hazardous				
					1,520.00				
Maximum Daily Feed Rate (tonnes/m ³)									
Hazardous Waste (tonnes)		Non-Hazardous Waste (tonnes)		Liquid Industrial Waste (m ³)		Other Liquid Waste (m ³)			
		540.00							
Change to Operations									
<input type="checkbox"/>	No change proposed		<input type="checkbox"/>	Change does not require fundamental design review			<input type="checkbox"/>	Change requires fundamental design review	



4.5 Landfill Site – Complete this information if this facility operates as a landfill site

Waste Types to be Accepted at the Landfill				Design Capacity									
<input type="checkbox"/>	Hazardous waste or liquid industrial waste		<input type="checkbox"/>	≤ 40,000 m ³		<input type="checkbox"/>	> 40,000 m ³ ≤ 3 million m ³		<input type="checkbox"/>	> 3 million m ³			
<input type="checkbox"/>	Waste referred to in item 15 Schedule 4, O. Reg. 363 (uncontaminated tree stumps, leaves, branches, concrete and rocks)		<input type="checkbox"/>	≤ 40,000 m ³		<input type="checkbox"/>	> 40,000 m ³ ≤ 3 million m ³		<input type="checkbox"/>	> 3 million m ³			
<input type="checkbox"/>	Waste other than hazardous waste and liquid industrial waste, other than site referred to in item 15, schedule 4, O. Reg. 363		<input type="checkbox"/>	≤ 40,000 m ³		<input type="checkbox"/>	> 40,000 m ³ ≤ 3 million m ³		<input type="checkbox"/>	> 3 million m ³			
You are not required to complete section 4.5.													
Maximum Landfilling Capacity (m ³)													
Hazardous Waste			Non-Hazardous Waste			Liquid Industrial Waste			Other Liquid Waste				
Maximum Amount of Waste to be Received													
Hazardous Waste (tonnes)		Non-Hazardous Waste (tonnes)		Liquid Industrial Waste (m ³)		Other Liquid Waste (m ³)							
Daily	Annually	Daily	Annually	Daily	Annually	Daily	Annually		Daily	Annually			
Landfill Information													
Area to be Landfilled (hectares)		Estimated Date of Closure (y/m/d)		Control Types (select all that apply)									
				<input type="checkbox"/>	Leachate Collection		<input type="checkbox"/>	Landfill Gas Collection		<input type="checkbox"/>	None		
				<input type="checkbox"/>	Other (describe):								
Change to Operations													
<input type="checkbox"/>	No change proposed			<input type="checkbox"/>	Change does not require fundamental design review or hydrogeological assessment				<input type="checkbox"/>	Change requires fundamental design review or hydrogeological assessment			

Section 5: Regulatory Requirements

Form ID: 180043

5.1 Environmental Assessment Act (EAA) Requirements

Are the works for which this proposal is made subject to (or exempted from) the requirements of the EAA? Yes No

If "Yes," please check one of the following

The works for which this application is made are exempt from the requirements of the EAA under:

Section _____ of Ontario Regulation No. _____ or

Declaration/Exemption Order Number _____

If Regulation, Declaration Order or Exemption Order does not refer directly to this facility, state in a covering letter or other document why it does apply to this facility – Please provide supporting information

The works for which this application is made have fulfilled all of the requirements of the EAA through the completion of the requirements of a Class EA process:

Name of Class EA: _____

Schedule/Group/Category (if applicable): _____

If applicable, please submit a copy of the completion documents.

Were Part II Order requests received? Yes No *If Yes, please submit a copy of the Minister's decision letter.*

The works for which this application is made have fulfilled all of the requirements for the EAA through:

Completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the EAA.

Please submit the Statement of Completion, and indicate if any Elevation Request(s) were received. If Elevation Request(s) were received, please submit a copy of the Director's decision letter.

Completion of an Environmental Assessment

Please submit a copy of the signed Notice of Approval.

5.2 Hearing under the Environmental Protection Act

Is this application subject to a requirement for a mandatory hearing under s.30 of the *Environmental Protection Act*?

Yes No

5.3 Environmental Bill of Rights (EBR) Requirements

Is this a proposal for a prescribed instrument under EBR? Yes No

If "Yes", is this proposal exempted from EBR requirements? Yes No

If "Yes," please check one of the following

This proposal has been considered in a substantially equivalent process or by a decision of a tribunal. *Please provide supporting information*

This proposal is for an amendment to or revocation of an existing Certificate of Approval that is not environmentally significant. *Please provide supporting information*

This proposal is for an emergency situation. *Please provide supporting information*

This proposal has been subject to or exempted from EAA Requirements. **Please provide supporting information**

5.4 Additional Public Consultation/Notification

Has any additional public consultation / notification related to the project is in the process of being completed or has previously been completed (such as public hearings or notification of First Nations)

Yes

If "Yes",

1) describe the public consultation / notification below:

No 2) attach a separate list describing each of these consultation activities, the results achieved, and planned future consultation activities.

See Attached Public Consultation Report

Section 6: Supporting Information

6.1 Supporting Information Checklist - This is a list of all supporting information to this application and is subject to the FOIPPA and EBR.

Mandatory	Attachment	Attached	Reference	Confidential* (√)
★	Proof of Legal Name of Applicant	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Not required for Municipalities; Required for Covanta Energy Corporation (Attachment 5)	<input type="checkbox"/>
	Copy of NEPDA Permit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Copy of Municipal Planning Approval (ORMCA)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes Reference Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Figure 1 in Attachment 1	<input type="checkbox"/>
★	Yes Name, Address and Phone Number of the Operating Authority	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
	Name, Address and consent of land/site owner for the installation/construction and operation of the works/facility	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Land owned by Region	<input type="checkbox"/>
★	Yes Verification of EBR Public Participation Exception	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	EA - Notice of Approval (Attachment 2)	<input type="checkbox"/>
★	Record of Public Consultation Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 3	<input type="checkbox"/>
★	Zoning Confirmation from the Municipality	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	The Municipality has executed a Host Community Agreement signed February 18 2010 (Attachment 4)	<input type="checkbox"/>
★	Yes Site Plan/Location Map with Geo-referencing point(s) identified	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Figure 1 in Attachment 1	<input type="checkbox"/>
★	Yes Design and Operations Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 1	<input type="checkbox"/>
	Drainage Study	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Hydrogeological Assessment Report	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Waste Comprehensive Requirements 1. Engineers Report 2. Declarations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes Application Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
	Financial Assurance/ Financial Assurance Estimates	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes A copy of this application has been sent to the local district office	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	A copy of this application has been sent to the local municipality	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	Yes Record of EA Process: 1. Class EA Completion documents, or 2. Environmental Screening Process- Statement of Completion, or 3. Individual EA – Notice of Approval.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	EA - Notice of Approval (Attachment 2)	<input type="checkbox"/>
Other Attachments				
	Title	Reference		Confidential* (√)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
	Are you attaching an additional list of attachments? <input type="checkbox"/> Yes <input type="checkbox"/> No	If there is not enough space to list all of the attachments included in this application package, please include an additional listing of these attachments.		<input type="checkbox"/>

***Please note:** the release of information contained in application forms and documentation submitted in support of applications for approval is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. This Act defines what may and may not be disclosed to the public, and is used to assess all requests for information contained in the documents on file with an application for approval. The information submitted with an application for approval may also be subject to the *Environmental Bill of Rights*. In those situations, the application and the associated non-confidential supporting documentation is made available for review by members of the public. The applicants should therefore identify all documents as noted above which are to be considered confidential and must provide detailed evidence in support of this claim. This evidence will be one of the factors the ministry would consider when making a decision regarding disclosure of specific documents on file.

For Office Use Only			
Reference Number	Payment Received \$	Date (y/m/d)	Initials

Form ID: 180043

Payment Information: **Application for a Provisional Certificate of Approval for a Waste Disposal Site**

Please Note:

1. If you are completing this form by hand, you must attach a copy of the form titled "Costs for EPA s.27 (Waste Management) Applications - Supplement to Application for Approval" (PIBS 4186). You do not need to attach the supplemental form if you are filling in this form electronically.
2. If you are completing this form electronically, the fees for this application have been calculated based on the information you have provided. The Ministry may require additional information during the review of your application that could impact the total fee required.
3. All fees should be paid in Canadian funds, payable to the Ontario Minister of Finance.
4. Credit card payments are accepted for payments under \$10,000 only.
5. If you are paying by certified cheque or money order, please staple your payment to this page.
6. Do not include this page in the copies of your application that are being provided to the local MOE Office or the local municipality(s).
7. The information collected in this section of the form is considered confidential and will only be used to process your application fee.

Amount Enclosed	Method of Payment		
\$ 42,200.00	<input checked="" type="checkbox"/> Certified Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> Journal Entry
	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express

Credit Card Information (if paying by VISA, MasterCard or American Express)

Name on Card (please print)	Credit Card Number	Expiry Date (mm/yyyy)
Cardholder Signature	Date (yyyy/mm/dd)	

If paying by certified cheque or money order, please attach it here.



**DURHAM YORK ENERGY CENTRE
APPLICATION FOR A CERTIFICATE OF APPROVAL
(WASTE DISPOSAL SITE)**

APPLICATION FORM

Certificate of Approval (Waste Disposal Site)

The Regional Municipality of York

General Information and Instructions

General:

Information requested in this form is collected under the authority of the *Environmental Protection Act*, R.S.O. 1990 (EPA) and the *Environmental Bill of Rights*, C. 28, Statutes of Ontario, 1993, (EBR) and will be used to evaluate applications for approval of waste disposal sites under Section 27, EPA. Questions about this collection of information should be directed to: Information Unit Supervisor, Environmental Assessment and Approvals Branch, 2 St. Clair Ave. W, Floor 12A, Toronto ON M4V 1L5. Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions:

1. **Applicants are responsible for ensuring that they complete the most recent application form.** When completing this form, please refer to the following guidance material: the "Guide for Applying for Certificate of Approval of Waste Disposal Sites, Section 27, 30, 31 and 32, EPA," (referred to as the Guide) and "Guide - Application Cost for Waste Management, S. 27, EPA". Application forms and supporting documentation are available from the Environmental Assessment and Approvals Branch toll free at 1-800-461-6290 (locally at 416-314-8001), from your local District Office of the Ministry of the Environment, and in the "Publications" section of the Ministry of the Environment website at <http://www.ene.gov.on.ca/envision/gp/index.htm#disposal>.
2. Questions regarding completion and submission of this application should be directed to the Environmental Assessment and Approvals Branch, 2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5, telephone number 1-800-461-6290 or (416) 314-8001, or to your local District Office of the Ministry of the Environment.
3. A complete application consists of:
 - 1) a completed and signed application form;
 - 2) all required supporting information identified in this form, the guidance material, and
 - 3) a certified cheque, money order or credit card payment, in Canadian funds, made payable to the *Ontario Minister of Finance* for the applicable application fee.

This form must be completed with respect to all requirements identified in the guidance material in order for it to be considered an application for approval.

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT. The Ministry may require additional information during the technical review of any application initially accepted as complete.

4. The original application, along with the supporting information and the application fee, must be sent to:

**The Ministry of the Environment,
Director, Environmental Assessment and Approvals Branch, Section 27
2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5**

A copy of the application and the supporting information must be sent to the local Ministry District Office which has jurisdiction over the area where the facilities are located. To locate the appropriate local Ministry District Office, please visit the Ministry of the Environment Internet site at: www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist.

A copy of the application and the supporting information must also be sent to the local municipality (unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality). Copies shall be provided to both the upper and lower tier municipality if applicable to the area where this facility is located.

A cover letter addressed to the Director of Environmental Assessment and Approvals Branch should accompany both submissions and indicate that a copy of the complete submission has been sent to the local District Office and local municipality(s).

5. Information contained in this application is not considered confidential and will be made available to the public upon request. Information submitted as supporting information may be claimed as confidential but will be subject to the *Freedom of Information and Protection of Privacy Act* (FOIPPA) and *EBR*. If you do not claim confidentiality at the time of submitting the information, the Ministry may make the information available to the public without further notice to you.
6. The electronic version of this form incorporates several features to assist you with completing your application. The form will calculate certain values based on the information you enter and will assist you in ensuring that all required information is included with your application. This form has been save-enabled; you can save a copy of this form that includes any information you have entered. You are encouraged to use the electronic version of this form, available on the Ministry of the Environment website at: <http://www.ene.gov.on.ca/envision/gp/4181e.pdf>.

Application for a Provisional Certificate of Approval for a Waste Disposal Site

Ce formulaire est disponible en français

For Office Use Only			
Reference Number	Payment Received \$	Date (y/m/d)	Initials

Form ID: 2145142

Application Summary

Applicant Name *(legal name of individual or organization as evidenced by legal documents)*

The Regional Municipality of York

Project Name *(Project identifier to be used as a reference in correspondence)*

Durham York Energy Centre

Project Description Summary *(If EBR is applicable, this summary will be used in the EBR posting notice)*

An Energy from Waste Facility is proposed to be constructed and operated on vacant land located on a 12.1 hectare property located in the Clarington Energy Business Park on the west side of Osbourne Road in the Regional Municipality of Durham. The facility will function to receive and thermally process municipal solid waste generated in the Regions of Durham and York. The energy content in the form of superheated steam will be used to generate electricity and potentially provide district heating. The hours of operation are 24 hours per day, 7 days per week, 365 days per year. The Facility meets all applicable air, noise waste and water environmental requirements under the Province of Ontario.

Required Information	Completed (yes or no)
<input checked="" type="checkbox"/> Project Name & Description	Yes
<input checked="" type="checkbox"/> Section 1: Applicant Information	Yes
<input checked="" type="checkbox"/> Section 2: Project Information	Yes
<input checked="" type="checkbox"/> Section 3: Site Information	Yes
<input checked="" type="checkbox"/> Section 4: Facility Information	Yes
<input checked="" type="checkbox"/> Section 5: Regulatory Requirements	Yes
<input checked="" type="checkbox"/> Section 6: Supporting Information	Yes
<input checked="" type="checkbox"/> Payment Information Section	Yes

Application Status: **FORM COMPLETE.** Print Completed Form

Cost Summary:

Administrative processing <i>(required for most applications)</i>	\$ 200.00
Hearing <i>(if mandatory or necessary)</i>	\$ 0.00

Review of Application	\$ 42,000.00
TOTAL COST	\$ 42,200.00

Section 1: Applicant Information

1.1 Applicant Information (Owner of works/facility)

Applicant Name (legal name of individual or organization as evidenced by legal documents) **The Regional Municipality of York**

Business Name (the name under which the entity is operating or trading - also referred to as trade name) **The Regional Municipality of York**

Business Identification Number

Applicant Type:

Corporation
 Individual
 Partnership
 Sole Proprietor
 Federal Government
 Municipal Government
 Provincial Government
 Other (describe):

North American Industry Classification System (NAICS) Code **562210** Waste Treatment and Disposal

Business Activity Description (a description of the business endeavour, this may include products sold, services provided or machinery/equipment used, etc.)

Waste Treatment and Disposal

1.2 Applicant Physical Address

Civic Address - Street information (includes street number, name, type and direction) **17250 Yonge Street**

Unit Identifier (i.e. apartment number)

Survey Address (Not required if Street information is provided)

Lot

Conc.

Part

Reference Plan

Municipality /Unorganized Township County/District **York region**

Province/State **Ontario**

Country **Canada**

Postal Code **L3Y 6Z1**

Telephone Number (include area code & ext.) **(905)830-4444** ext.

Fax Number (include area code)

Mobile Number (include area code)

E-mail Address

Map Datum **NAD83**

Zone **17N**

Accuracy Estimate **+/- 2m**

Geo Referencing Method **Aerial Photo**

Geo Reference (southwest corner of property) **UTM Easting 621685**

UTM Northing **4878270**

1.3 Applicant Mailing Address

Same as Applicant Physical Address? Yes No (if no, please provide site address information below)

Civic Address - Street information (civic numbering and street information including street number, name, type and direction) **17250 Yonge Street**

Unit Identifier (i.e. apartment number)

Delivery Designator

Delivery Identifier

Postal Station

Municipality **Newmarket**

Province/State **Ontario**

Country **Canada**

Postal Code **L3Y 6Z1**

1.4 Statement of Applicant

I, the undersigned hereby declare that, to the best of my knowledge:

- The information contained herein and the information submitted in support of this application is complete and accurate in every way and I am aware of the penalties against providing false information as per s. 184(2) of the *Environmental Protection Act*.
- The Project Technical Information Contact identified in this form is authorized to act on my behalf for the purpose of obtaining approval under Section 27 of the EPA for the waste disposal site identified herein.
- I have used the most recent application form, as obtained from the Ministry of the Environment Internet site at <http://www.ene.gov.on.ca/en/publications/forms/index.php#PartWaste> or the Environmental Assessment and Approvals Branch at 1-800-461-6290.

Name of Signing Authority (please print) **Erin Mahoney**


Title **Commissioner of Environmental Services**

Telephone Number (including area code & extension) **(905)830-4444** ext. **5125**

Fax Number (including area code) **(905)895-0260**

E-mail Address **erin.mahoney@york.ca**

Mobile Number (including area code)

Signature 

Date (y/m/d) **200/03/02**

Section 2: Project Information

2.1 Application Type

Type of Application:	
<input checked="" type="checkbox"/> New Certificate of Approval	<input type="checkbox"/> New Comprehensive Certificate of Approval
<input type="checkbox"/> Amendment to Current Certificate of Approval	<input type="checkbox"/> Convert Existing Approval to Comprehensive Certificate of Approval
<input type="checkbox"/> Administrative Amendment to Current Certificate of Approval	<input type="checkbox"/> Revocation
<input type="checkbox"/> Compliance with Conditions of the Existing Approval	
Is this a submission for Preliminary Review of your application?	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <i>If yes, the application must be complete and finalized before you submit it for Preliminary Review.</i>
Application Initiated by:	
<input checked="" type="checkbox"/> Proponent	<input type="checkbox"/> Environmental Assessment and Approvals Branch
<input type="checkbox"/> Provincial Officer Order (attach copy)	<input type="checkbox"/> Other (specify): _____
Current Certificate of Approval	
Certificate of Approval Number	Certificate of Approval Date of Issue (yyyy/mm/dd)
_____	_____
Project Schedule	
Estimated date for start of construction/installation (yyyy/mm/dd)	Estimated date for start of operation (yyyy/mm/dd)
2011/06/01	2014/01/01
Comprehensive Certificate of Approval – Eligibility Screening Questionnaire	
Screening Result: You are not required to complete the screening questionnaire	

2.2 Project Technical Information Contact

Name of Project Technical Information Contact		Company	
Samuel S. Joshi		Covanta Energy Corporation	
Telephone Number (include area code & ext.)	Fax Number (include area code)	Mobile Number (include area code)	E-mail Address
(862)345-5064 ext.	(862)345-5210	(862)485-7438	SJoshi@covantaenergy.com
Address Information:			
Same as Applicant Mailing Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide technical information contact address information below)			
Civic Address - Street information (civic numbering and street information including street number, name, type and direction)			Unit Identifier (i.e. apartment number)
445 South Street			
Delivery Designator	Delivery Identifier	Postal Station	
Municipality /Unorganized Township	Province/State	Country	Postal Code
Morristown	New jersey	USA	07960

Section 3: Site Information

3.1 Site Address - (location where activity/works applied for is to take place)

Same as Applicant Physical Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide site address information below)					
Civic Address- Street information (includes street number, name, type and direction) 72 Osbourne Road					Unit Identifier (i.e. apartment number)
Survey Address (Legal description of the site)	Lot 27	Conc. Broken Front	Part 1	Reference Plan 40R-26782	
Municipality /Unorganized Township Municipality of Clarington		County/District Region of durham		Postal Code L1E 2R2	
Non Address Information (includes any additional information to clarify applicants' physical location)					
Geo Reference (southwest corner of property)					
Map Datum NAD83	Zone 17	Accuracy Estimate +/- 5m	Geo Referencing Method Firstbase map	UTM Easting 680425.041	UTM Northing 4860195.229

3.2 Site Information - (location where activity/works applied for is to take place)

Site Name Durham York Energy Centre	MOE District Office York-Durham District Office
Is the site (property) that is the subject of this application owned by the Applicant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If no, please attach the owner's name, address and a signed letter granting consent for the installation and operation of the facilities</i>	
Is the Applicant the operating authority of the site that is the subject of this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If no, please attach the operating authority name, address and phone number</i>	
Is the Site located in an area of development control as defined by the Niagara Escarpment Planning & Development Act (NEPDA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, please attach a copy of the NEPDA permit for proposed activity/work</i>	
Is the Site located on the Oak Ridges Moraine Conservation Area as defined by the Oak Ridges Moraine Conservation Plan (ORMCP), a regulation made under the Oak Ridges Moraine Conservation Act (ORMCA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, please attach proof of Municipal planning approval for the proposed activity/work</i>	

3.3 Site Zoning and Classification

Present Land Use Vacant	Present Official Plan Designation Urban System - Employment Area	Present Zoning Category Energy Park General Industrial
Adjacent Land Use (select all that apply) <input checked="" type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Other(specify): _____		
Does the site currently have proper zoning for the proposed facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Has this facility been identified as part of the Official Plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has the Applicant received municipal zoning confirmation? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please attach correspondence from the municipality</i>		

Section 4: Facility Information

Form ID: 2145142

4.1 Facility Description (information on the nature of the proposed business or activity at this site)

Type of Facility / Operation (select all that apply & complete all appropriate sections)

Landfill Transfer Processing Thermal Treatment Facility Household Hazardous Waste
 Closed Landfill Composting

Days and Hours of Operation: **365 days /year, 24 hours/day** Population Served by this Site (#): **1,800,000** Service Area: **Regions of Durham and York** Total Area of Site (hectares): **12.10**

Monitoring (select all that apply)

Groundwater Surface Water Landfill Gas Leachate None Other(specify): Air

Type(s) of Waste to be Accepted at this Site (select all that apply)

Municipal Waste Hazardous Waste Liquid Industrial Waste Other Liquid Waste

Municipal Waste Categories to be Accepted at this Site (select all that apply)

All Categories Domestic Sources IC&I sources Source Separated Organics Tires Leaf & Yard Waste
 Contaminated Soil Wood Waste Blue Box Materials Other(specify): _____

Other Liquid Waste Categories to be Accepted at this Site (select all that apply)

Processed Organics Waste from Food Processing / Preparation Operations Hauled Sewage Other(specify): _____

Hazardous / Liquid Industrial Waste Types to be Accepted at this Site

Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code

4.2 Other Approvals for Facility – Please attach a separate list if more space is required

Separate list attached? Yes No

List all other environmental approvals/permits applied for related to this project or received in relation to this project under the *Environmental Protection Act* (discharges to air, waste management, etc.) and the *Ontario Water Resources Act* (water and sewage works).

Approval Type	Approval Number	Approval or Application Date (yyyy/mm/dd)	Approval Type	Approval Number	Approval or Application Date (yyyy/mm/dd)
Air & Noise (EPA s.9)					
Sewage Works (OWRA s.53)					

4.3 Waste Transfer and/or Processing – Complete this information if waste transfer and/or processing take place at this facility.

Waste Types to be Transferred or Processed

Hazardous waste or liquid industrial waste ≤ 100 tonnes per day > 100 tonnes per day
 Waste other than hazardous waste and liquid industrial waste ≤ 100 tonnes per day > 100 tonnes per day

You are not required to complete section 4.3.

Liquid Waste

Maximum Storage Capacity (m ³)			Maximum Residual for Final Disposal (m ³)					
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Liquid Industrial		Other Liquid Waste	
			Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)		Maximum Residual for Final Disposal (tonnes)			
Hazardous	Non-Hazardous	Hazardous		Non-Hazardous	
		Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-Hazardous

Change to Operations

No change proposed Change does not require fundamental design review Change requires fundamental design review

4.4 Thermal Treatment Facility – Complete this information if thermal treatment takes place at this facility

Waste Types for Thermal Treatment				Design Capacity			
<input type="checkbox"/> Hazardous waste or liquid industrial waste		<input type="checkbox"/> ≤ 100 tonnes per day		<input type="checkbox"/> > 100 tonnes per day			
<input checked="" type="checkbox"/> Waste other than hazardous waste and liquid industrial waste		<input type="checkbox"/> ≤ 100 tonnes per day		<input checked="" type="checkbox"/> > 100 tonnes per day			
Liquid Waste							
Maximum Storage Capacity (m ³)			Maximum Residual for Final Disposal (m ³)				
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Liquid Industrial		Other Liquid Waste
			Daily	Annually	Daily	Annually	Daily
Maximum Storage Capacity (tonnes)				Maximum Residual for Final Disposal (tonnes)			
Hazardous		Non-Hazardous		Hazardous		Non-Hazardous	
			Daily	Annually	Daily	Annually	
		4,380.00			400.00	56,000.00	
Maximum Amount of Waste to be Received Daily							
Liquid (m ³)				Solid (tonnes)			
Hazardous	Liquid Industrial	Other Liquid Waste		Hazardous		Non-Hazardous	
						1,520.00	
Maximum Daily Feed Rate (tonnes/m ³)							
Hazardous Waste (tonnes)		Non-Hazardous Waste (tonnes)		Liquid Industrial Waste (m ³)		Other Liquid Waste (m ³)	
		540.00					
Change to Operations							
<input type="checkbox"/> No change proposed		<input type="checkbox"/> Change does not require fundamental design review		<input type="checkbox"/> Change requires fundamental design review			

4.5 Landfill Site – Complete this information if this facility operates as a landfill site

Waste Types to be Accepted at the Landfill				Design Capacity			
<input type="checkbox"/> Hazardous waste or liquid industrial waste		<input type="checkbox"/> ≤ 40,000 m ³		<input type="checkbox"/> > 40,000 m ³ ≤ 3 million m ³		<input type="checkbox"/> > 3 million m ³	
<input type="checkbox"/> Waste referred to in item 15 Schedule 4, O. Reg. 363 (uncontaminated tree stumps, leaves, branches, concrete and rocks)		<input type="checkbox"/> ≤ 40,000 m ³		<input type="checkbox"/> > 40,000 m ³ ≤ 3 million m ³		<input type="checkbox"/> > 3 million m ³	
<input type="checkbox"/> Waste other than hazardous waste and liquid industrial waste, other than site referred to in item 15, schedule 4, O. Reg. 363		<input type="checkbox"/> ≤ 40,000 m ³		<input type="checkbox"/> > 40,000 m ³ ≤ 3 million m ³		<input type="checkbox"/> > 3 million m ³	
Maximum Landfilling Capacity (m ³)							
Hazardous Waste		Non-Hazardous Waste		Liquid Industrial Waste		Other Liquid Waste	
Maximum Amount of Waste to be Received							
Hazardous Waste (tonnes)		Non-Hazardous Waste (tonnes)		Liquid Industrial Waste (m ³)		Other Liquid Waste (m ³)	
Daily	Annually	Daily	Annually	Daily	Annually	Daily	Annually
Landfill Information							
Area to be Landfilled (hectares)	Estimated Date of Closure (y/m/d)		Control Types (select all that apply)				
			<input type="checkbox"/> Leachate Collection		<input type="checkbox"/> Landfill Gas Collection		<input type="checkbox"/> None
			Other (describe):				
Change to Operations							
<input type="checkbox"/> No change proposed		<input type="checkbox"/> Change does not require fundamental design review or hydrogeological assessment		<input type="checkbox"/> Change requires fundamental design review or hydrogeological assessment			

Section 5: Regulatory Requirements

Form ID: 2145142

5.1 Environmental Assessment Act (EAA) Requirements

Are the works for which this proposal is made subject to (or exempted from) the requirements of the EAA? Yes No

If "Yes," please check one of the following

The works for which this application is made are exempt from the requirements of the EAA under:

Section _____ of Ontario Regulation No. _____ or

Declaration/Exemption Order Number _____

If Regulation, Declaration Order or Exemption Order does not refer directly to this facility, state in a covering letter or other document why it does apply to this facility – Please provide supporting information

The works for which this application is made have fulfilled all of the requirements of the EAA through the completion of the requirements of a Class EA process:

Name of Class EA: _____

Schedule/Group/Category (if applicable): _____

If applicable, please submit a copy of the completion documents.

Were Part II Order requests received? Yes No *If Yes, please submit a copy of the Minister's decision letter.*

The works for which this application is made have fulfilled all of the requirements for the EAA through:

Completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the EAA.

Please submit the Statement of Completion, and indicate if any Elevation Request(s) were received. If Elevation Request(s) were received, please submit a copy of the Director's decision letter.

Completion of an Environmental Assessment

Please submit a copy of the signed Notice of Approval.

5.2 Hearing under the Environmental Protection Act

Is this application subject to a requirement for a mandatory hearing under s.30 of the *Environmental Protection Act*?

Yes No

5.3 Environmental Bill of Rights (EBR) Requirements

Is this a proposal for a prescribed instrument under EBR? Yes No

If "Yes", is this proposal exempted from EBR requirements? Yes No

If "Yes," please check one of the following

This proposal has been considered in a substantially equivalent process or by a decision of a tribunal. *Please provide supporting information*

This proposal is for an amendment to or revocation of an existing Certificate of Approval that is not environmentally significant. *Please provide supporting information*

This proposal is for an emergency situation. *Please provide supporting information*

This proposal has been subject to or exempted from EAA Requirements. **Please provide supporting information**

5.4 Additional Public Consultation/Notification

Has any additional public consultation / notification related to the project is in the process of being completed or has previously been completed (such as public hearings or notification of First Nations)

Yes If "Yes",

1) describe the public consultation / notification below:

No 2) attach a separate list describing each of these consultation activities, the results achieved, and planned future consultation activities.

See Attached Public Consultation Report

Section 6: Supporting Information

6.1 Supporting Information Checklist - This is a list of all supporting information to this application and is subject to the FOIPPA and EBR.

Mandatory	Attachment	Attached	Reference	Confidential* (√)
★	Proof of Legal Name of Applicant	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Not required for Municipalities; Required for Covanta Energy Corporation (Attachment 5)	<input type="checkbox"/>
	Copy of NEPDA Permit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Copy of Municipal Planning Approval (ORMCA)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes Reference Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Figure 1 in Attachment 1	<input type="checkbox"/>
★	Yes Name, Address and Phone Number of the Operating Authority	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	Yes Name, Address and consent of land/site owner for the installation/construction and operation of the works/facility	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Land owned by The Regional Municipality of Durham	<input type="checkbox"/>
★	Yes Verification of EBR Public Participation Exception	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	EA - Notice of Approval (Attachment 2)	<input type="checkbox"/>
★	Record of Public Consultation Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 3	<input type="checkbox"/>
★	Zoning Confirmation from the Municipality	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	The Municipality has executed a Host Community Agreement signed February 18 2010 (Attachment 4)	<input type="checkbox"/>
★	Yes Site Plan/Location Map with Geo-referencing point(s) identified	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Figure 1 in Attachment 1	<input type="checkbox"/>
★	Yes Design and Operations Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 1	<input type="checkbox"/>
	Drainage Study	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Hydrogeological Assessment Report	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Waste Comprehensive Requirements 1. Engineers Report 2. Declarations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes Application Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
	Financial Assurance/ Financial Assurance Estimates	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes A copy of this application has been sent to the local district office	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	A copy of this application has been sent to the local municipality	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	Yes Record of EA Process: 1. Class EA Completion documents, or 2. Environmental Screening Process- Statement of Completion, or 3. Individual EA – Notice of Approval.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	EA - Notice of Approval (Attachment 2)	<input type="checkbox"/>
Other Attachments				
	Title	Reference		Confidential* (√)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
	Are you attaching an additional list of attachments? <input type="checkbox"/> Yes <input type="checkbox"/> No	If there is not enough space to list all of the attachments included in this application package, please include an additional listing of these attachments.		<input type="checkbox"/>

***Please note:** the release of information contained in application forms and documentation submitted in support of applications for approval is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. This Act defines what may and may not be disclosed to the public, and is used to assess all requests for information contained in the documents on file with an application for approval. The information submitted with an application for approval may also be subject to the *Environmental Bill of Rights*. In those situations, the application and the associated non-confidential supporting documentation is made available for review by members of the public. The applicants should therefore identify all documents as noted above which are to be considered confidential and must provide detailed evidence in support of this claim. This evidence will be one of the factors the ministry would consider when making a decision regarding disclosure of specific documents on file.

For Office Use Only			
Reference Number	Payment Received \$	Date (y/m/d)	Initials

Form ID: 2145142

Payment Information: **Application for a Provisional Certificate of Approval for a Waste Disposal Site**

Please Note:

1. If you are completing this form by hand, you must attach a copy of the form titled "Costs for EPA s.27 (Waste Management) Applications - Supplement to Application for Approval" (PIBS 4186). You do not need to attach the supplemental form if you are filling in this form electronically.
2. If you are completing this form electronically, the fees for this application have been calculated based on the information you have provided. The Ministry may require additional information during the review of your application that could impact the total fee required.
3. All fees should be paid in Canadian funds, payable to the Ontario Minister of Finance.
4. Credit card payments are accepted for payments under \$10,000 only.
5. If you are paying by certified cheque or money order, please staple your payment to this page.
6. Do not include this page in the copies of your application that are being provided to the local MOE Office or the local municipality(s).
7. The information collected in this section of the form is considered confidential and will only be used to process your application fee.

Amount Enclosed \$ 42,200.00	Method of Payment		
	<input checked="" type="checkbox"/> Certified Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> Journal Entry
	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express

Credit Card Information (if paying by VISA, MasterCard or American Express)

Name on Card (please print)	Credit Card Number	Expiry Date (mm/yyyy)
Cardholder Signature	Date (yyyy/mm/dd)	

If paying by certified cheque or money order, please attach it here.



APPLICATION FORM

Certificate of Approval (Waste Disposal Site)

Covanta Durham York Renewable Energy Limited Partnership

General Information and Instructions

General:

Information requested in this form is collected under the authority of the *Environmental Protection Act*, R.S.O. 1990 (EPA) and the *Environmental Bill of Rights*, C. 28, Statutes of Ontario, 1993, (EBR) and will be used to evaluate applications for approval of waste disposal sites under Section 27, EPA. Questions about this collection of information should be directed to: Information Unit Supervisor, Environmental Assessment and Approvals Branch, 2 St. Clair Ave. W, Floor 12A, Toronto ON M4V 1L5. Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions:

1. **Applicants are responsible for ensuring that they complete the most recent application form.** When completing this form, please refer to the following guidance material: the "Guide for Applying for Certificate of Approval of Waste Disposal Sites, Section 27, 30, 31 and 32, EPA," (referred to as the Guide) and "Guide - Application Cost for Waste Management, S. 27, EPA". Application forms and supporting documentation are available from the Environmental Assessment and Approvals Branch toll free at 1-800-461-6290 (locally at 416-314-8001), from your local District Office of the Ministry of the Environment, and in the "Publications" section of the Ministry of the Environment website at <http://www.ene.gov.on.ca/envision/gp/index.htm#disposal>.
2. Questions regarding completion and submission of this application should be directed to the Environmental Assessment and Approvals Branch, 2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5, telephone number 1-800-461-6290 or (416) 314-8001, or to your local District Office of the Ministry of the Environment.
3. A complete application consists of:
 - 1) a completed and signed application form;
 - 2) all required supporting information identified in this form, the guidance material, and
 - 3) a certified cheque, money order or credit card payment, in Canadian funds, made payable to the *Ontario Minister of Finance* for the applicable application fee.

This form must be completed with respect to all requirements identified in the guidance material in order for it to be considered an application for approval.

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT. The Ministry may require additional information during the technical review of any application initially accepted as complete.

4. The original application, along with the supporting information and the application fee, must be sent to:

**The Ministry of the Environment,
Director, Environmental Assessment and Approvals Branch, Section 27
2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5**

A copy of the application and the supporting information must be sent to the local Ministry District Office which has jurisdiction over the area where the facilities are located. To locate the appropriate local Ministry District Office, please visit the Ministry of the Environment Internet site at: www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist.

A copy of the application and the supporting information must also be sent to the local municipality (unless the application is for a revocation or an amendment that is environmentally insignificant or the applicant is a municipality). Copies shall be provided to both the upper and lower tier municipality if applicable to the area where this facility is located.

A cover letter addressed to the Director of Environmental Assessment and Approvals Branch should accompany both submissions and indicate that a copy of the complete submission has been sent to the local District Office and local municipality(s).

5. Information contained in this application is not considered confidential and will be made available to the public upon request. Information submitted as supporting information may be claimed as confidential but will be subject to the *Freedom of Information and Protection of Privacy Act* (FOIPPA) and *EBR*. If you do not claim confidentiality at the time of submitting the information, the Ministry may make the information available to the public without further notice to you.
6. The electronic version of this form incorporates several features to assist you with completing your application. The form will calculate certain values based on the information you enter and will assist you in ensuring that all required information is included with your application. This form has been save-enabled; you can save a copy of this form that includes any information you have entered. You are encouraged to use the electronic version of this form, available on the Ministry of the Environment website at: <http://www.ene.gov.on.ca/envision/gp/4181e.pdf>.

Application for a Provisional Certificate of Approval for a Waste Disposal Site

Ce formulaire est disponible en français

For Office Use Only			
Reference Number	Payment Received \$	Date (y/m/d)	Initials

Form ID: 1675281

Application Summary

Applicant Name (legal name of individual or organization as evidenced by legal documents)

Covanta Durham York Renewable Energy Limited Partnership

Project Name (Project identifier to be used as a reference in correspondence)

Durham York Energy Centre

Project Description Summary (If EBR is applicable, this summary will be used in the EBR posting notice)

An Energy from Waste Facility is proposed to be constructed and operated on vacant land located on a 12.1 hectare property located in the Clarington Energy Business Park on the west side of Osbourne Road in the Regional Municipality of Durham. The facility will function to receive and thermally process municipal solid waste generated in the Regions of Durham and York. The energy content in the form of superheated steam will be used to generate electricity and potentially provide district heating. The hours of operation are 24 hours per day, 7 days per week, 365 days per year. The Facility meets all applicable air, noise waste and water environmental requirements under the Province of Ontario.

Required Information	Completed (yes or no)
Project Name & Description	Yes
Section 1: Applicant Information	Yes
Section 2: Project Information	Yes
Section 3: Site Information	Yes
Section 4: Facility Information	Yes
Section 5: Regulatory Requirements	Yes
Section 6: Supporting Information	Yes
Payment Information Section	Yes

Application Status: **FORM COMPLETE.** [Print Completed Form](#)

Cost Summary:

Administrative processing (required for most applications)	\$ 200.00
Hearing (if mandatory or necessary)	\$ 0.00

Review of Application	\$ 42,000.00
TOTAL COST	\$ 42,200.00

Section 1: Applicant Information

Form ID: 1285782

1.1 Applicant Information (Owner of works/facility)

Applicant Name <i>(legal name of individual or organization as evidenced by legal documents)</i> Covanta Durham York Renewable Energy Limited Partnership		Business Identification Number 3246299
Business Name <i>(the name under which the entity is operating or trading - also referred to as trade name)</i> Covanta Durham York Renewable Energy Limited Partnership		<input checked="" type="checkbox"/> same as Applicant Name
Applicant Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Federal Government <input type="checkbox"/> Municipal Government <input type="checkbox"/> Provincial Government <input type="checkbox"/> Other <i>(describe)</i> :	North American Industry Classification System (NAICS) Code 562210 Waste Treatment and Disposal
Business Activity Description <i>(a description of the business endeavour, this may include products sold, services provided or machinery/equipment used, etc.)</i> Waste Treatment and Disposal		

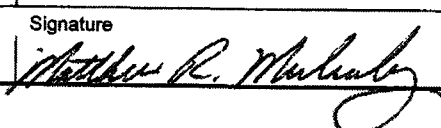
1.2 Applicant Physical Address

Civic Address- Street Information <i>(includes street number, name, type and direction)</i> 445 South Street		Unit Identifier <i>(i.e. apartment number)</i>	
Survey Address <i>(Not required if Street Information is provided)</i>	Lot	Conc.	Part
Municipality /Unorganized Township Morristown	County/District	Province/State New jersey	Country USA
Postal Code 07960	Telephone Number <i>(include area code & ext.)</i> (862)345-5064 ext.	Fax Number <i>(include area code)</i>	Mobile Number <i>(include area code)</i>
E-mail Address			
Geo Reference <i>(southwest corner of property)</i>			
Map Datum NAD83	Zone 18N	Accuracy Estimate +/- 2m	Geo Referencing Method Aerial Photo
UTM Easting 544548		UTM Northing 4513989	

1.3 Applicant Mailing Address

Same as Applicant Physical Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, please provide site address information below)</i>	
Civic Address - Street information <i>(civic numbering and street information including street number, name, type and direction)</i> 445 South Street	
Unit Identifier <i>(i.e. apartment number)</i>	
Delivery Designator	Delivery Identifier
Postal Station	
Municipality Morristown	Province/State New jersey
Country USA	Postal Code 07960

1.4 Statement of Applicant

<p>I, the undersigned hereby declare that, to the best of my knowledge:</p> <ul style="list-style-type: none"> The information contained herein and the information submitted in support of this application is complete and accurate in every way and I am aware of the penalties against providing false information as per s. 184(2) of the <i>Environmental Protection Act</i>. The Project Technical Information Contact identified in this form is authorized to act on my behalf for the purpose of obtaining approval under Section 27 of the EPA for the waste disposal site identified herein. I have used the most recent application form, as obtained from the Ministry of the Environment Internet site at http://www.ene.gov.on.ca/en/publications/forms/index.php#PartWaste or the Environmental Assessment and Approvals Branch at 1-800-461-6290. 		
Name of Signing Authority <i>(please print)</i> Matthew R. Mulcahy	Title Senior Vice President, Business Development	
Telephone Number <i>(including area code & extension)</i> (862)345-5445 ext.	Fax Number <i>(including area code)</i> (862)345-5150	E-mail Address mmulcahy@covantaenergy.com
Mobile Number <i>(including area code)</i> (201)214-7054	Signature 	Date <i>(y/m/d)</i> March 2, 2011

Section 2: Project Information

Form ID: 1675281

2.1 Application Type

Type of Application:

- | | |
|--|---|
| <input checked="" type="checkbox"/> New Certificate of Approval | <input type="checkbox"/> New Comprehensive Certificate of Approval |
| <input type="checkbox"/> Amendment to Current Certificate of Approval | <input type="checkbox"/> Convert Existing Approval to Comprehensive Certificate of Approval |
| <input type="checkbox"/> Administrative Amendment to Current Certificate of Approval | <input type="checkbox"/> Revocation |
| <input type="checkbox"/> Compliance with Conditions of the Existing Approval | |

Is this a submission for Preliminary Review of your application?

- Yes No *If yes, the application must be complete and finalized before you submit it for Preliminary Review.*

Application Initiated by:

- Proponent Environmental Assessment and Approvals Branch Provincial Officer Order (attach copy) Other (specify):

Current Certificate of Approval

Certificate of Approval Number

Certificate of Approval Date of Issue (yyyy/mm/dd)

Project Schedule

Estimated date for start of construction/installation (yyyy/mm/dd)

Estimated date for start of operation (yyyy/mm/dd)

2011/06/01

2014/01/01

Comprehensive Certificate of Approval – Eligibility Screening Questionnaire

Screening Result: You are not required to complete the screening questionnaire

2.2 Project Technical Information Contact

Name of Project Technical Information Contact		Company	
Samuel S. Joshi		Covanta Energy Corporation	
Telephone Number (include area code & ext.)	Fax Number (include area code)	Mobile Number (include area code)	E-mail Address
(862)345-5064 ext.	(862)345-5210	(862)485-7438	SJoshi@covantaenergy.com
Address Information:			
Same as Applicant Mailing Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide technical information contact address information below)			
Civic Address - Street information (civic numbering and street information including street number, name, type and direction)			Unit Identifier (i.e. apartment number)
445 South Street			
Delivery Designator	Delivery Identifier	Postal Station	
Municipality /Unorganized Township	Province/State	Country	Postal Code
Morristown	New jersey	USA	07960

Section 3: Site Information

3.1 Site Address - (location where activity/works applied for is to take place)

Same as Applicant Physical Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide site address information below)					
Civic Address- Street information (includes street number, name, type and direction) 72 Osbourne Road					Unit Identifier (i.e. apartment number)
Survey Address (Legal description of the site)	Lot	Conc.	Part	Reference Plan	
	27	Broken Front	1	40R-26782	
Municipality /Unorganized Township		County/District		Postal Code	
Municipality of Clarington		Region of durham		L1E 2R2	
Non Address Information (includes any additional information to clarify applicants' physical location)					
Geo Reference (southwest corner of property)					
Map Datum	Zone	Accuracy Estimate	Geo Referencing Method	UTM Easting	UTM Northing
NAD83	17	+/- 5m	Firstbase map	680425.041	4860195.229

3.2 Site Information - (location where activity/works applied for is to take place)

Site Name	MOE District Office
Durham York Energy Centre	York-Durham District Office
Is the site (property) that is the subject of this application owned by the Applicant?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, please attach the owner's name, address and a signed letter granting consent for the installation and operation of the facilities	
Is the Applicant the operating authority of the site that is the subject of this application?	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, please attach the operating authority name, address and phone number	
Is the Site located in an area of development control as defined by the Niagara Escarpment Planning & Development Act (NEPDA)?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please attach a copy of the NEPDA permit for proposed activity/work	
Is the Site located on the Oak Ridges Moraine Conservation Area as defined by the Oak Ridges Moraine Conservation Plan (ORMCP), a regulation made under the Oak Ridges Moraine Conservation Act (ORMCA)?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please attach proof of Municipal planning approval for the proposed activity/work	

3.3 Site Zoning and Classification

Present Land Use	Present Official Plan Designation	Present Zoning Category
Vacant	Urban System - Employment Area	Energy Park General Industrial
Adjacent Land Use (select all that apply)		
<input checked="" type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Other(specify):		
Does the site currently have proper zoning for the proposed facility?		Has this facility been identified as part of the Official Plan?
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has the Applicant received municipal zoning confirmation?		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach correspondence from the municipality		

Section 4: Facility Information

4.1 Facility Description (information on the nature of the proposed business or activity at this site)

Type of Facility / Operation (select all that apply & complete all appropriate sections)

Landfill Transfer Processing Thermal Treatment Facility Household Hazardous Waste
 Closed Landfill Composting

Days and Hours of Operation: **365 days /year, 24 hours/day** Population Served by this Site (#): **1,800,000** Service Area: **Regions of Durham and York** Total Area of Site (hectares): **12.10**

Monitoring (select all that apply)

Groundwater Surface Water Landfill Gas Leachate None Other(specify): Air

Type(s) of Waste to be Accepted at this Site (select all that apply)

Municipal Waste Hazardous Waste Liquid Industrial Waste Other Liquid Waste

Municipal Waste Categories to be Accepted at this Site (select all that apply)

All Categories Domestic Sources IC&I sources Source Separated Organics Tires Leaf & Yard Waste
 Contaminated Soil Wood Waste Blue Box Materials Other(specify): _____

Other Liquid Waste Categories to be Accepted at this Site (select all that apply)

Processed Organics Waste from Food Processing / Preparation Operations Hauled Sewage Other(specify): _____

Hazardous / Liquid Industrial Waste Types to be Accepted at this Site

Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code	Class Code

4.2 Other Approvals for Facility – Please attach a separate list if more space is required

Separate list attached? Yes No

List all other environmental approvals/permits applied for related to this project or received in relation to this project under the *Environmental Protection Act* (discharges to air, waste management, etc.) and the *Ontario Water Resources Act* (water and sewage works).

Approval Type	Approval Number	Approval or Application Date (yyyy/mm/dd)	Approval Type	Approval Number	Approval or Application Date (yyyy/mm/dd)
Air & Noise (EPA s.9)					
Sewage Works (OWRA s.53)					

4.3 Waste Transfer and/or Processing – Complete this information if waste transfer and/or processing take place at this facility.

Waste Types to be Transferred or Processed Design Capacity

Hazardous waste or liquid industrial waste ≤ 100 tonnes per day > 100 tonnes per day
 Waste other than hazardous waste and liquid industrial waste ≤ 100 tonnes per day > 100 tonnes per day

You are not required to complete section 4.3.

Liquid Waste

Maximum Storage Capacity (m ³)			Maximum Residual for Final Disposal (m ³)					
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Liquid Industrial		Other Liquid Waste	
			Daily	Annually	Daily	Annually	Daily	Annually

Solid Waste

Maximum Storage Capacity (tonnes)		Maximum Residual for Final Disposal (tonnes)			
Hazardous	Non-Hazardous	Hazardous		Non-Hazardous	
		Daily	Annually	Daily	Annually

Maximum Amount of Waste to be Received Daily

Liquid (m ³)			Solid (tonnes)	
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous	Non-Hazardous

Change to Operations

No change proposed Change does not require fundamental design review Change requires fundamental design review



4.4 Thermal Treatment Facility – Complete this information if thermal treatment takes place at this facility

Waste Types for Thermal Treatment				Design Capacity				
<input type="checkbox"/>	Hazardous waste or liquid industrial waste		<input type="checkbox"/>	≤ 100 tonnes per day	<input type="checkbox"/>	> 100 tonnes per day		
<input checked="" type="checkbox"/>	Waste other than hazardous waste and liquid industrial waste		<input type="checkbox"/>	≤ 100 tonnes per day	<input checked="" type="checkbox"/>	> 100 tonnes per day		
Liquid Waste								
Maximum Storage Capacity (m ³)			Maximum Residual for Final Disposal (m ³)					
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Liquid Industrial		Other Liquid Waste	
			Daily	Annually	Daily	Annually	Daily	Annually
Solid Waste								
Maximum Storage Capacity (tonnes)				Maximum Residual for Final Disposal (tonnes)				
Hazardous		Non-Hazardous		Hazardous		Non-Hazardous		
				Daily	Annually	Daily	Annually	
		4,380.00				400.00	56,000.00	
Maximum Amount of Waste to be Received Daily								
Liquid (m ³)			Solid (tonnes)					
Hazardous	Liquid Industrial	Other Liquid Waste	Hazardous		Non-Hazardous			
						1,520.00		
Maximum Daily Feed Rate (tonnes/m ³)								
Hazardous Waste (tonnes)		Non-Hazardous Waste (tonnes)		Liquid Industrial Waste (m ³)		Other Liquid Waste (m ³)		
		540.00						
Change to Operations								
<input type="checkbox"/>	No change proposed		<input type="checkbox"/>	Change does not require fundamental design review		<input type="checkbox"/>	Change requires fundamental design review	



4.5 Landfill Site – Complete this information if this facility operates as a landfill site

Waste Types to be Accepted at the Landfill				Design Capacity				
<input type="checkbox"/>	Hazardous waste or liquid industrial waste		<input type="checkbox"/>	≤ 40,000 m ³	<input type="checkbox"/>	> 40,000 m ³ ≤ 3 million m ³	<input type="checkbox"/>	> 3 million m ³
<input type="checkbox"/>	Waste referred to in item 15 Schedule 4, O. Reg. 363 (uncontaminated tree stumps, leaves, branches, concrete and rocks)		<input type="checkbox"/>	≤ 40,000 m ³	<input type="checkbox"/>	> 40,000 m ³ ≤ 3 million m ³	<input type="checkbox"/>	> 3 million m ³
<input type="checkbox"/>	Waste other than hazardous waste and liquid industrial waste, other than site referred to in item 15, schedule 4, O. Reg. 363		<input type="checkbox"/>	≤ 40,000 m ³	<input type="checkbox"/>	> 40,000 m ³ ≤ 3 million m ³	<input type="checkbox"/>	> 3 million m ³
You are not required to complete section 4.5.								
Maximum Landfilling Capacity (m ³)								
Hazardous Waste		Non-Hazardous Waste		Liquid Industrial Waste		Other Liquid Waste		
Maximum Amount of Waste to be Received								
Hazardous Waste (tonnes)		Non-Hazardous Waste (tonnes)		Liquid Industrial Waste (m ³)		Other Liquid Waste (m ³)		
Daily	Annually	Daily	Annually	Daily	Annually	Daily	Annually	
Landfill Information								
Area to be Landfilled (hectares)	Estimated Date of Closure (y/m/d)		Control Types (select all that apply)					
			<input type="checkbox"/>	Leachate Collection	<input type="checkbox"/>	Landfill Gas Collection	<input type="checkbox"/>	None
			<input type="checkbox"/>	Other (describe):				
Change to Operations								
<input type="checkbox"/>	No change proposed		<input type="checkbox"/>	Change does not require fundamental design review or hydrogeological assessment		<input type="checkbox"/>	Change requires fundamental design review or hydrogeological assessment	

Section 5: Regulatory Requirements

Form ID: 1675281

5.1 Environmental Assessment Act (EAA) Requirements

Are the works for which this proposal is made subject to (or exempted from) the requirements of the EAA? Yes No

If "Yes," please check one of the following

The works for which this application is made are exempt from the requirements of the EAA under:

Section _____ of Ontario Regulation No. _____ or

Declaration/Exemption Order Number _____

If Regulation, Declaration Order or Exemption Order does not refer directly to this facility, state in a covering letter or other document why it does apply to this facility – Please provide supporting information

The works for which this application is made have fulfilled all of the requirements of the EAA through the completion of the requirements of a Class EA process:

Name of Class EA: _____

Schedule/Group/Category (if applicable): _____

If applicable, please submit a copy of the completion documents.

Were Part II Order requests received? Yes No *If Yes, please submit a copy of the Minister's decision letter.*

The works for which this application is made have fulfilled all of the requirements for the EAA through:

Completion of an Environmental Screening Process pursuant to O. Reg. 101/07 of the EAA.

Please submit the Statement of Completion, and indicate if any Elevation Request(s) were received. If Elevation Request(s) were received, please submit a copy of the Director's decision letter.

Completion of an Environmental Assessment

Please submit a copy of the signed Notice of Approval.

5.2 Hearing under the Environmental Protection Act

Is this application subject to a requirement for a mandatory hearing under s.30 of the *Environmental Protection Act*?

Yes No

5.3 Environmental Bill of Rights (EBR) Requirements

Is this a proposal for a prescribed instrument under EBR? Yes No

If "Yes", is this proposal exempted from EBR requirements? Yes No

If "Yes," please check one of the following

This proposal has been considered in a substantially equivalent process or by a decision of a tribunal. *Please provide supporting information*

This proposal is for an amendment to or revocation of an existing Certificate of Approval that is not environmentally significant. *Please provide supporting information*

This proposal is for an emergency situation. *Please provide supporting information*

This proposal has been subject to or exempted from EAA Requirements. **Please provide supporting information**

5.4 Additional Public Consultation/Notification

Has any additional public consultation / notification related to the project is in the process of being completed or has previously been completed (such as public hearings or notification of First Nations)

Yes If "Yes",

1) describe the public consultation / notification below:

No 2) attach a separate list describing each of these consultation activities, the results achieved, and planned future consultation activities.

See Attached Public Consultation Report

Section 6: Supporting Information

6.1 Supporting Information Checklist - This is a list of all supporting information to this application and is subject to the FOIPPA and EBR.

Mandatory	Attachment	Attached	Reference	Confidential* (√)
★	Proof of Legal Name of Applicant	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Not required for Municipalities; required for Covanta (Attachment 5)	<input type="checkbox"/>
	Copy of NEPDA Permit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Copy of Municipal Planning Approval (ORMCA)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes Reference Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Figure 1 in Attachment 1	<input type="checkbox"/>
★	Yes Name, Address and Phone Number of the Operating Authority	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
	Name, Address and consent of land/site owner for the installation/construction and operation of the works/facility	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Land owned by Region	<input type="checkbox"/>
★	Yes Verification of EBR Public Participation Exception	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	EA - Notice of Approval (Attachment 2)	<input type="checkbox"/>
★	Record of Public Consultation Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 3	<input type="checkbox"/>
★	Zoning Confirmation from the Municipality	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	The Municipality has executed a Host Community Agreement signed February 18 2010 (Attachment 4)	<input type="checkbox"/>
★	Yes Site Plan/Location Map with Geo-referencing point(s) identified	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Figure 1 in Attachment 1	<input type="checkbox"/>
★	Yes Design and Operations Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 1	<input type="checkbox"/>
	Drainage Study	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Hydrogeological Assessment Report	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
	Waste Comprehensive Requirements 1. Engineers Report 2. Declarations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Application Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
	Financial Assurance/ Financial Assurance Estimates	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	not applicable	<input type="checkbox"/>
★	Yes A copy of this application has been sent to the local district office	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	A copy of this application has been sent to the local municipality	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★	Yes Record of EA Process: 1. Class EA Completion documents, or 2. Environmental Screening Process- Statement of Completion, or 3. Individual EA – Notice of Approval.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	EA - Notice of Approval (Attachment 2)	<input type="checkbox"/>
Other Attachments				
Title		Reference		Confidential* (√)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
Are you attaching an additional list of attachments? <input type="checkbox"/> Yes <input type="checkbox"/> No		If there is not enough space to list all of the attachments included in this application package, please include an additional listing of these attachments.		<input type="checkbox"/>

***Please note:** the release of information contained in application forms and documentation submitted in support of applications for approval is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. This Act defines what may and may not be disclosed to the public, and is used to assess all requests for information contained in the documents on file with an application for approval. The information submitted with an application for approval may also be subject to the *Environmental Bill of Rights*. In those situations, the application and the associated non-confidential supporting documentation is made available for review by members of the public. The applicants should therefore identify all documents as noted above which are to be considered confidential and must provide detailed evidence in support of this claim. This evidence will be one of the factors the ministry would consider when making a decision regarding disclosure of specific documents on file.

For Office Use Only			
Reference Number	Payment Received	Date (y/m/d)	Initials
	\$		

Form ID: 1675281

Payment Information: Application for a Provisional Certificate of Approval for a Waste Disposal Site

Please Note:

1. If you are completing this form by hand, you must attach a copy of the form titled "Costs for EPA s.27 (Waste Management) Applications - Supplement to Application for Approval" (PIBS 4186). You do not need to attach the supplemental form if you are filling in this form electronically.
2. If you are completing this form electronically, the fees for this application have been calculated based on the information you have provided. The Ministry may require additional information during the review of your application that could impact the total fee required.
3. All fees should be paid in Canadian funds, payable to the Ontario Minister of Finance.
4. Credit card payments are accepted for payments under \$10,000 only.
5. If you are paying by certified cheque or money order, please staple your payment to this page.
6. Do not include this page in the copies of your application that are being provided to the local MOE Office or the local municipality(s).
7. The information collected in this section of the form is considered confidential and will only be used to process your application fee.

Amount Enclosed	Method of Payment		
\$ 42,200.00	<input checked="" type="checkbox"/> Certified Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> Journal Entry
	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express

Credit Card Information (if paying by VISA, MasterCard or American Express)

Name on Card <i>(please print)</i>	Credit Card Number	Expiry Date <i>(mm/yyyy)</i>
Cardholder Signature	Date <i>(yyyy/mm/dd)</i>	

If paying by certified cheque or money order, please attach it here.