## **Clear Cutting By-law - Applicant Guide**

# Consultation with Township

Consult with Township By-law
Department if you are
planning to clear cut
woodlands with an area of
2.47ac (1 ha) or greater within
one Roll number.



## **Submit Application**

Submit application (Schedule B) and Fee (Schedule D) for Clear Cutting permit with required comments from Step 2.



#### **Approval**

The Township Officer will issue a Tree Clear Cutting permit to be posted on the subject lands.

See Schedule C.



If submitting application:

The applicant gathers information for application.

TIMELINE DEPENDENT ON APPLICANT.

The Planning Department will contact the required authorities for comments. See Section 6 of the Clear Cutting By-law.

**Contact required for Authorities** 

APPROXIMATELY 2 WEEKS.

## SCHEDULE "B"

#### **APPLICATION FOR PERMIT TO HARVEST TREES**

|                                                                       |                                                                | APPLICATION FOR PER                                                                                                                        | WIII TO HARVEST                                                | TREES                     |
|-----------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------|
| 90 Main S                                                             | P OF NORTH GLENGARRY<br>street South, PO BOX 700<br>a, KOC 1A0 |                                                                                                                                            |                                                                | Telephone: (613) 525-1116 |
| Name of                                                               | f Applicant                                                    |                                                                                                                                            |                                                                | Phone                     |
| Email                                                                 |                                                                |                                                                                                                                            |                                                                |                           |
| Applicar                                                              | nt's Mailing Address                                           |                                                                                                                                            |                                                                |                           |
| Owner c                                                               | of Property                                                    |                                                                                                                                            |                                                                | Phone                     |
| Civic Add                                                             | dress of Property Under                                        | Application                                                                                                                                |                                                                |                           |
| Concess                                                               | ion:Lot:                                                       | Part Lot:                                                                                                                                  | Zoning                                                         | Parcel Size:(ac)          |
| Size of a                                                             | rea proposed to be har                                         | vest:                                                                                                                                      | (ac)                                                           |                           |
| Name Co                                                               | ontractor/person respo                                         | nsible for cutting:                                                                                                                        |                                                                | Phone number:             |
| iii) the iv) the v) dir vi) loc vii) dis viii) loc ix) loc x) loc (AI | cation of all burning piles<br>ation of watercourses a         | streets and lanes;<br>y;<br>of burning piles, shredo<br>s, rubble piles, and any o<br>nd drains, setbacks fror<br>vincially Significant We | ding, and describe<br>other material left<br>n watercourses ar |                           |
| <b>r</b><br>Pleas                                                     | narked in green are propose ensure the following               | oosed to be retained.                                                                                                                      | the completed Ap                                               |                           |
| а                                                                     | ı) \$50/0.4ha (1 ac), up to                                    | a maximum oi 3000                                                                                                                          | b) Sketch                                                      | riaii                     |
| Harvesti                                                              | ng start date:                                                 |                                                                                                                                            |                                                                |                           |
| Harvesti                                                              | ng end date:                                                   |                                                                                                                                            |                                                                |                           |

| NOTE: Site plan for this application or see attached. |  |  |  |  |  |  |
|-------------------------------------------------------|--|--|--|--|--|--|
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| 3. | I agree that the tree cutting operations will be conducted in accordance with the Clear                                                                                                                                                                                                                                                              |   |  |  |  |  |  |  |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--|--|--|--|--|--|
|    | Cutting By-law 43-2021 or any order issued under it and that I am familiar with the                                                                                                                                                                                                                                                                  |   |  |  |  |  |  |  |
|    | contents and requirements of that by-law. I am aware that the wood or debris piles shall be                                                                                                                                                                                                                                                          |   |  |  |  |  |  |  |
|    | removed within the two (3) year permit period.                                                                                                                                                                                                                                                                                                       |   |  |  |  |  |  |  |
|    |                                                                                                                                                                                                                                                                                                                                                      |   |  |  |  |  |  |  |
|    | Dated thisday of                                                                                                                                                                                                                                                                                                                                     |   |  |  |  |  |  |  |
|    | Signature of Applicant                                                                                                                                                                                                                                                                                                                               |   |  |  |  |  |  |  |
|    | Where the Applicant is not the registered owner of the property, this Application will not beconsidered complete or processed until the registered owner signs below.                                                                                                                                                                                |   |  |  |  |  |  |  |
|    | I,, of [print owner's name]                                                                                                                                                                                                                                                                                                                          |   |  |  |  |  |  |  |
|    | [owner's mailing address] [postal code]                                                                                                                                                                                                                                                                                                              |   |  |  |  |  |  |  |
|    | [telephone #] [email address]                                                                                                                                                                                                                                                                                                                        |   |  |  |  |  |  |  |
|    | Being the registered owner of the property described in this Application, I hereby consent to this Application being made and to the issuance of a Permit to the Applicant. I certify that the informationin this Application is correct and true and acknowledge that I am the person responsible for compliance with a person clear Cutting By-law | S |  |  |  |  |  |  |
|    | Dated thisday of                                                                                                                                                                                                                                                                                                                                     |   |  |  |  |  |  |  |
|    | Signature of Owner                                                                                                                                                                                                                                                                                                                                   |   |  |  |  |  |  |  |
|    | The applicant must apply for a Burn Permit and contact the Fire Department before burning trees, as per the Open-Air Burning By-law.                                                                                                                                                                                                                 |   |  |  |  |  |  |  |
|    | 4. APPROVAL                                                                                                                                                                                                                                                                                                                                          |   |  |  |  |  |  |  |
|    | Signature of Township Officer                                                                                                                                                                                                                                                                                                                        |   |  |  |  |  |  |  |

## **OFFICE USE ONLY:**

#### AUTHORITIES TO BE CONTACTED BY TOWNSHIP OFFICER PRIOR TO ISSUING PERMIT TOHARVEST

| WOOD   | DLANDS                                                                                                                                                                      |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The fo | ollowing authorities have been contacted by the Township Officer:                                                                                                           |
| (a)    | the By-law Department                                                                                                                                                       |
| (b)    | the Fire Department                                                                                                                                                         |
| (c)    | the Public Works Department at The Township of North Glengarry                                                                                                              |
| (d)    | the Transportation Department at the County of Stormont, Dundas and Glengarry <u>if the lands are located alonga County Road.</u>                                           |
| (e)    | Raisin Region Conservation Authority OR South Nation Conservation Authority (if deemed necessary)                                                                           |
| (f)    | The Township Planning Department notified adjacent neighbours by regular mail a minimum of two weeks before issuing the clear-cutting permit for information purposes only. |
|        |                                                                                                                                                                             |
|        |                                                                                                                                                                             |
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## SCHEDULE "C" PERMIT TO HARVEST TREES

|           | ermit is hereby issued by the Township of North Glengarry to harvest trees, as per ar Cutting By-law as outlined below: |    |
|-----------|-------------------------------------------------------------------------------------------------------------------------|----|
| Cico      | as outlined below.                                                                                                      |    |
| File No.  | T-                                                                                                                      |    |
| Owner/A   | applicant:                                                                                                              |    |
| Address:  |                                                                                                                         |    |
|           | CON:MUNICIPALITY:                                                                                                       |    |
| Descripti | ion of area and trees to be harvested:                                                                                  |    |
|           |                                                                                                                         |    |
|           |                                                                                                                         |    |
|           | Fownship Officer or their designate may enter the property to inspect the lands andthe treing practices.                | e: |
| Conditio  | ons:                                                                                                                    |    |
|           |                                                                                                                         |    |
| DATE OF   | EXPIRY (3 YEARS MAXIMUM):                                                                                               |    |
| DATE OF   | ISSUE:                                                                                                                  |    |

#### SCHEDULE "D"

#### **FEE SCHEDULE**

**Permit to harvest Woodlands** 

\$50/0.4ha (1 ac)(1

Permit per property)

To a maximum of \$500

Harvesting must be completed within 3 year of permit issuance.

**Extension of Approved Permit** 

\$50/0.4ha (1 ac)

One year extension.

To a maximum of \$500

Additional Fees may apply from the appropriate Conservation Authority (i.e. Watershed Jurisdiction).

<sup>\* 10%</sup> of the fees will directly fund the Township's tree replanting efforts.

| _ | _  |   |    |   |   |     |
|---|----|---|----|---|---|-----|
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|                                                  | WORK ORDER (REHABIL                     | ITATION OR REPLANTING)                                                                                                                                        |
|--------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date:                                            |                                         |                                                                                                                                                               |
| Owner:                                           |                                         |                                                                                                                                                               |
| Municipal Address /                              |                                         |                                                                                                                                                               |
| ·                                                |                                         | MUNICIPALITY:                                                                                                                                                 |
| Municipal Address:                               |                                         |                                                                                                                                                               |
| revealed a violation of YOU ARE HEREBY DIF       | of the Township's Clear Cutt            | orthwith stop, halt, cease, anddesist from                                                                                                                    |
| •                                                |                                         | n of trees or removalthereof, and, to<br>n injured and or harvested from your                                                                                 |
|                                                  | HARGED THAT THE VIOLATION OR REPLANTING | ON ABOVE NOTED BE REMEDIED,THROUGH<br>ON OR BEFORE:                                                                                                           |
|                                                  |                                         | Date)                                                                                                                                                         |
| THE FOLLOWING W                                  | ORK REHABILITATION OR RE                | PLANTING WORK IS TO BE DONEON THE LANDS:                                                                                                                      |
|                                                  |                                         |                                                                                                                                                               |
|                                                  |                                         |                                                                                                                                                               |
| <b>Township may under</b> Failure to comply with | rtake the rehabilitation or re          | d within the time specified in this order, the eplanting of the trees at the expense of the owner. he Township of North Glengarry with no alternative notice. |
|                                                  |                                         | lear Cutting By-law No. 43-2021, allows the fthe provisions of the By-law.                                                                                    |
| •                                                | ·                                       | peration. Should you have any questions, please 00am to 4:00pm., Monday through Friday at 613-                                                                |
|                                                  |                                         |                                                                                                                                                               |

Signature of Township Officer

| _ |    |     |       | _ | //-!! | ~- |    |
|---|----|-----|-------|---|-------|----|----|
| • | CH | HD) | 11.11 | Н | "F"   | ST | NP |

## WORK ORDER

YOU ARE HEREBY DIRECTED AND ORDERED to forthwith stop, halt, cease, and desist from any and all works associated with the destruction of trees or removalthereof from those lands comprising:

| Date:                                            |                               |                                                                                                                                                                                    |
|--------------------------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Owner:                                           |                               |                                                                                                                                                                                    |
| Municipal Address /                              | Legal Description             |                                                                                                                                                                                    |
| LOT:                                             | CONCESSION:                   | MUNICIPALITY:                                                                                                                                                                      |
| Municipal Address:                               |                               |                                                                                                                                                                                    |
|                                                  |                               | _, an inspection to your property, as noted above, r Cutting By-law No. 43-2021.                                                                                                   |
| IT IS HEREBY OR                                  | DERED THAT ALL DEST<br>BEFORI | RUCTION OR REMOVAL OF TREES BESTOPPED ON OR                                                                                                                                        |
|                                                  |                               | (Date)                                                                                                                                                                             |
| DESCRIPTION OF IN                                |                               |                                                                                                                                                                                    |
| Effective Order Date                             | ::                            | To:                                                                                                                                                                                |
| <b>Township may under</b> Failure to comply with | take the rehabilitatio        | nedied within the time specified in this order, the nor replanting of the trees at the expense of the owner. eave the Township of North Glengarry with no alternative ther notice. |
|                                                  |                               | the Clear Cutting By-law No. 43-2021, allows the any of the provisions of the By-law.                                                                                              |
| · · · · · · · · · · · · · · · · · · ·            | •                             | I cooperation. Should you have any questions, please of 8:00am to 4:00pm., Monday through Friday at 613-                                                                           |
| Signature of To                                  | ownship Officer               |                                                                                                                                                                                    |

| SCHEDULE "G"                                    |  |
|-------------------------------------------------|--|
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| et fines, to be approved later by the Province. |  |
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