



**Request for Administrative Review** 

## Under Section 8 of O. Reg. 41/24 made under the Conservation Authorities Act

Applicant Information:	
Name:	Company:
Address:	City/Town:
Province:	Postal Code:
Tel (Primary):	Email:

Tel (Primary):		Email:
Property Ir	nformation:	
Street Addres	s (911):	
Municipality:		
Lot and Conce	essions (if rural property):	
Registered Pla	nn No. (if applicable):	
Roll # (if address not available):		
In accordance with the UTRCA's Administrative Review Policies, a request for administrative review applies to permit applications made under Section 28.1 of the <i>Conservation Authorities Act</i> , and under the following circumstances. Check all that apply:		
applic subm	S.8(1)(a): I [the applicant] believe I have submitted all information required for a complete application and I have not received written confirmation from UTRCA staff within 21 days upon submission of the application. I would like confirmation from UTRCA that my application has been received by this office and is complete.	
The p	ermit application for my proposed proj	ect was submitted on
	<b>(b):</b> I [the applicant] disagree with the ermit is incomplete.	UTRCA staff determination that the application for
Please	Please explain:	





"Inspiring a Healthy Environment"

S.8(1)(c): I [the applicant] am of the view the studies or plans is not reasonable.		
Please explain.		
Signature of Applicant:	Date:	
FOR UTRCA STAFF USE ONLY:		
Application #:	Date Received:	