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SCHEDULE A

DISTRICT OF CENTRAL SAANICH SOIL REMOVAL OR DEPOSIT PERMIT APPLICATION

Applicant Information

(filled out by applicant)

Name of applicant Silver Rill Corn - Clayton Fox
(if company, insert company name and individual representative applying on behalf of company)

Applicant's address 7235 Wallace Dr

Applicant's telephone number 250 883 4920

Applicant's fax number (if available) _____

Applicant's email address (if available) clayton@silverrillcorn.com

Land Identification Information

Legal description of Soil removal Location Application will be amended when location confirmed

Municipal address _____

Legal description of Soil Deposit Location 026-574-195
Lot A VIP80420

Municipal address 7235 Wallace Dr

Land Ownership of Soil Removal Location

Registered owner _____

Address of owner _____

Lease holder (if applicable) _____

Address of lease holder (if applicable) _____

Land Ownership of Soil Deposit Location

Registered owner Clayton Fox

Address of owner 7235 Wallace Dr

Lease holder (if applicable) Silver Rill Corn

Address of lease holder (if applicable) _____

Soil Removal or Deposit Information

Prepared by Professional Engineer: Andrew Jackson - Ryzuk

Estimated quantity of Soil	Type of Material	Quantity	Location
1) to be removed			
2) to be deposited	Clean Fill	1375 m ³	7235 Wallace

Estimate prepared by: Attached Report
(signature and seal required)

Date July 9 2024

Professional Engineer's Reports

Attached, as part of this Application, are the following reports:

- 1) Geotechnical Memorandum Andrew Jackson July 9 2024
(Title) (Author) (Date)
- 2) _____
- 3) _____

I, Clayton Fox, as applicant on my own behalf, or as authorized signatory of the applicant Silver Rill Corn (print company name), make this Application.

I confirm that the applicant has the authority to remove or deposit Soil on this land.

Declared the 9 day of July, 2024.

[Signature]
(Signature of Applicant)

[Signature]

(Authorized Signature of Owner)