

# Notice of Request for Drain Minor Improvement *Drainage Act, R.S.O. 1990, c. D.17, subs. 78 (5)*

To: The Council of the Corporation of the Municipality of South Huron

Re: Pickering Municipal Drain

(Name of Drain)

**In accordance with section 78 (5) of the *Drainage Act*, take notice that I, as owner of land affected, request that the above mentioned drain be improved.**

☒ The work being requested is a Minor Improvement Project

**I believe that the project being requested meets all the following criteria for a minor improvement project:**

- The property owner initiates the improvement on an individual property or two or more adjacent properties that are owned by the same person or the owners are related parties;
- The property owner is paying for costs of the activity, which includes, without limitation engineering construction, contingency costs, incremental future maintenance and eligible municipal administrative costs unless that person and the municipality in which the activity is taking place agree otherwise;
- Carrying out the activity does not require construction access from neighbouring properties or the person initiating the activity has obtained the consent for the construction access from all applicable owners of the neighbouring properties prior to beginning the activity and has provided such proof of consent to the municipality as part of the application to carry out the activity;
- The activity will not result in any changes as to how future repair and maintenance costs are allocated to other property owners in the watershed;
- The activity does not change drainage capacity or erosion potential;
- The activity does not result in the existing drainage works being enclosed; and
- The activity does not take place within any wetlands.

**The project can be completed with access from:**

- ☒ The requestor property
- ☐ My neighbour's property and written permission has been granted and attached to this Notice of Request for Minor Drain Improvements form.
- ☐ The municipal road right-of-way

**a. As owner of land requesting the minor improvement described below, I hereby request pursuant to subsection 78 (5) of the *Drainage Act* that the minor improvement project described immediately below be approved. I acknowledge responsibility for all costs of the minor improvement project, even if the minor improvement project does not proceed.**

Provide a more specific description of the proposed drain improvement you are requesting

Relocating 160 metres of the existing open ditch municipal drain to the outside boundaries along the road allowance and fill in old drain to square off the field and create additional workable farmland.

## Property Owners

- Requestors of minor improvement projects become financially responsible as soon as they sign a request and it is accepted by council as a minor improvement project.
- Your municipal property tax bill will provide the property description and parcel roll number.
- In rural areas, the property description should be in the form of (part) lot and concession and civic address.
- In urban areas, the property description should be in the form of street address and lot and plan number, if available.

### Property Description

Lot 28, South Boundary Concession, Municipality of South Huron

Ward or Geographic Township  
Stephen Ward

Parcel Roll Number  
27-036

If the property is owned in partnership, all partners must be listed. If the property is owned by a corporation, list the corporation's name and the name and corporate position of the authorized officer. Only the owner of the property may request a drain improvement.

I hereby request approval for the minor improvement project for the land described above and acknowledge my/our financial obligations.

## Ownership

### Corporation

If you need to provide additional information, please attach along with this form.

### Corporation (The individual with authority to bind the corporation must sign the form)

Name of Signing Officer (Last, First Name) (Type/Print)

McCann, David

Position Title

PRESIDENT

Name of Corporation

J.A. McCann & Sons Ltd.

I have the authority to bind the Corporation.

Signature

David McCann

Date (yyyy/mm/dd)

2022/09/07

### Enter the mailing address and primary contact information of property owner below:

Last Name

McCann

First Name

David

Middle Initial

J.

### Mailing Address

Unit Number

Street Number

35650

Street Name

Cassidy Road Suite R R # 3

PO Box

City/Town

Ailsa Craig

Province

ON

Postal Code

N0M 1A0

Telephone Number

519-234-6455

Cell Phone Number (Optional)

Email Address (Optional)

j.a.mccann@hay.net

To be completed by recipient municipality:

Notice filed this



day of September

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Name of Clerk (Last, First Name)

Msuya-Collison, Rebekah

Signature of Clerk

