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**PROJECT DESCRIPTION – Ontario Region**

**Instructions for completion:** This form is designed to gather as much relevant information about your project as is possible. The information gathered in this form will be used by AANDC to help determine the required level of environmental review. Some sections may not apply to your project, however, please indicate why something is not applicable. The use of N/A may result in delays or the return of this form. **Not Applicable is NOT ACCEPTABLE.**

**Section A: Basic Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Name:** | Enter project name and /or nick name. | | |
| **Band/Aboriginal Government Name:** | Enter band/gov’t name here | **Band No:** | Enter here |
| **Reserve Name:** | Enter reserve name here | **Reserve No:** | Enter here |
| **Band Address:** | Enter band address here | **Postal Code:** | Enter here |
| **Telephone No.** | Enter here | **Fax No.** | Enter here |

Signatory to a modern Treaty? ** Yes  No**

If so, are there obligations within the treaty concerning environmental reviews? ** Yes  No**

Section B: Project Information

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Start Date:** | Enter date here. | **Completion Date:** | Enter date here. |
| **Location:** Enter legal land description and/or GPS coordinates. | | | |
| **Project Summary:** Brief project overview. Must describe the purpose; methods and expected outcomes. Include approximate project footprint and area required and attach any maps, plans or figures. | | | |

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| **Structures:** Describe any permanent and/or temporary structures associated with this project, (eg. Fuels tanks, buildings, garages, etc.) |

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| **Infrastructure:** Describe any associated infrastructure associated with this project (eg. Sewer lines, water lines, gas lines, power lines, communication lines, etc.) |

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| **Activities:** Describe project activities. Include activities associated to pre-planning, site preparation, construction phases, operation, and decommissioning. |
| **Waste generation:** Describe wastes expected to be generated and/or released during construction, operation, decommissioning and any related activities (including construction debris, effluents, emissions, and any substances released to the ground, water or air, etc). |

**Are funds being provided by AANDC for your project?  Yes  No If yes, what Program?** Enter name of program(s)

**Will this project receive funding from another federal agency?  Yes  No If so what department/agency?** Enter name of agency/department(s)

**Is there supplemental information attached?  Yes  No**

**Please describe:** Describe the information attached or submitted under separate cover. E.g. Maps, plans, figures, assessments, etc.

**Section C: Land Description:**

***Is there* surface water:**

1. Present on/or within 30 meters of your project boundary? ** Yes  No**
2. Within 30 meters that is considered navigable?  ** Yes  No**

If so, describe the surface water: *(Check* ***all*** *that apply to the project)*

**Fresh water:**  **** Stream **** Lake **** Wetland **** River **** Pond **** Reservoir **** Active Floodplain

**Coastal and Marine:** **** Beach **** Cove **** Mud Flat **** Salt Marsh **** Bay **** Exposed Coastline

**Other:** **** Estuary

**Ground water: *Are there drinking water wells or aquifer recharge zones:***

1. Present on your site?  ** Yes  No**
2. Within 500 meters of your project boundary? ** Yes  No**

**What is the depth of the water table?** If not known enter expected depth and support your argument.

**Topography:** Choose a category

**Soil Profile:** Choose a category

**Land Use:**

|  |
| --- |
| **Past Land Uses:** List past land uses (eg. Natural state, agricultural, waste site, gas station, oil and gas lease, etc.) |
| **Current Land use:** List past land uses (eg. Natural state, agricultural, waste site, gas station, oil and gas lease, etc.) |

**Adjacent Land uses:** *(select all that apply):*

**** Residential **** School **** Daycare **** Commercial **** Agricultural **** Airport **** Railway **** Recreation area **** Other - Describe here **** Provincial or National Park, Conservation area Enter name here **** Utility Corridor *(pipelines, gas lines, power lines, water lines, etc.)*  Describe here **** Industrial *(oil and gas, manufacturing, sawmill, etc.)*  Describe here

|  |
| --- |
| **Describe any unique features of the land: Describe here** |

**Section D: Flora and Fauna:**

**Wildlife: *Is/*a*re there any:***

1. ***Species at Risk*** in or adjacent to the proposed project area? ** Yes  No  Unknown** Visit: [Species at Risk Public Registry.](http://www.sararegistry.gc.ca/default_e.cfm) *Name species and describe habitat here*
2. ***Migratory Birds*** that use the area at any time during the year? ** Yes  No  Unknown** Visit: [Migratory Birds List](http://www.ec.gc.ca/nature/default.asp?lang=En&n=496E2702-1) *Name species and describe use here*
3. ***Migratory Birds*** *(or eggs or nests)* likely to be captured or killed? ** Yes  No  Unknown** *Describe the circumstances and rational here*
4. ***Fish or Fish Habitat*** that could be impacted by the project? ** Yes  No  Unknown Fish** defined [Section 2 of the Fisheries Act](http://laws-lois.justice.gc.ca/eng/acts/F-14/page-1.html#docCont) **Fish Habitat** defined [Subsection 34(1) of the Fisheries Act](http://laws-lois.justice.gc.ca/eng/acts/F-14/page-7.html) *Describe the nature of impacts to Fish or Fish Habitat*

**Vegetation:**

List predominant vegetation in and adjacent to the site. Include upper story, under story and ground cover.

Visit: <http://www.sararegistry.gc.ca/default_e.cfm>*Describe any plant species at risk*

**Section E: Traditional/Cultural Uses:**

Are there any sites of **Cultural/Historical/Archaeological** significance within or near the project area? ** Yes  No** *Describe any known sites of cultural/ historical/archaeological significance here*

Are there any **Traditional areas** within or near the project area? ** Yes  No** *Describe traditional area here, how it is or was used and by whom*

**Section F: Consultation and Public Participation:**

Are you planning to conduct aboriginal consultations? ** Yes** Enter start date here ** No**

Are there potential off-reserve impacts? ** Yes  No** If so, do you plan to conduct public consultation? ** Yes** Enter start date here ** No**

**Section G: Comments and Other Information:**

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| **Additional Comments:** Use this space to add any additional comments or information you consider relevant to the project. |

**Section H: Contact Information:**

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| --- | --- | --- | --- |
| **Proponent Name:** | Enter proponent name | | |
| **Proponent Contact:** | Proponent contact | | |
| **Proponent Address:** | Proponent address |  | Postal code |
| **Telephone No.** | Proponent phone no. |  | Fax No. |
| **Email address:** | Contact email | | |

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| **First Nation:** | Enter band name | | |
| **Contact name:** | Name of band contact | | |
| **First Nation Address:** | Band address |  | Postal Code |
| **Telephone No.** | Band address |  | Fax No. |
| **Email address:** | Band Contact email | | |

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| --- | --- | --- | --- |
| **Other Contact:** | Enter other contact descriptor | | |
| **Contact name:** | Name of contact | | |
| **Contact Address:** | Contact address |  | Postal Code |
| **Telephone No.** | Contact phone No. |  | Fax No. |
| **Email address:** | Contact email | | |

**Completed by:**

|  |  |  |  |
| --- | --- | --- | --- |
| Choose an item. | Describe role | | |
| **Contact:** | Enter completer’s name | | |
| **Address:** | Completer’s address |  | Postal Code |
| **Telephone No.** | Completer’s phone No. |  | Fax No. |
| **Email address:** | Completer’s email | | |

**Section I: TO BE COMPLETED BY AANDC OFFICIALS ONLY**

**Environmental Officer Recommendation:**

**1.** Is this a designated project under CEAA 2012? ** Yes** *Choose authority* ** No**

**2.** Level of environmental review required: *Choose level*

**3.** Are there prescribed safeguards expected of the proponent? ** Yes  No** *Describe safeguarded prescribed to the proponent in relation to the project.*

**4.** Is there prescribed reporting expected of the proponent? ** Yes  No** *Describe reporting requirements or insert CIDM Document number of Terms of Reference.*

**5.** Will this project require land tenure? ** Yes** *Choose an item.* ** No**

**6.** Will any other legal instrument(s) be required? ** Yes** Describe instrument required ** No**

**7.** Will an expert department be engaged? ** Yes** *Departments to be consulted.* ** No**

**8.** Is Aboriginal Consultation required/recommended? ** Yes  No**

**9.** Is public consultation/participation recommended? ** Yes  No**

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| --- |
| **Comments:** *Enter any additional comments you consider warranted here including any rational for selections in questions 1 though 8 above.* |

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| --- | --- | --- |
| **EO’s Name** |  | enter date |
| Environment Officer | Signature | Date |

**Responsibility Centre Manager:**

|  |
| --- |
| **Comments:** *Enter any additional comments you consider warranted here.* |

|  |  |  |
| --- | --- | --- |
| **RCM’s Name** |  | enter date |
| RCM | Signature | Date |