

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.

| ject Name: | Enter project name and /or nick nar | ne. | |
|---|---|--|-------------------|
| d/Aboriginal ernment Name: | Enter band/gov't name here | Band No: | Enter here |
| erve Name: | Enter reserve name here | Reserve No: | Enter here |
| d Address: | Enter band address here | Postal Code: | Enter here |
| ephone No. | Enter here | Fax No. | Enter here |
| are there obligations | within the treaty concerning environmer | ntal reviews? Ves | □ No |
| On D. Project init | ormation | | |
| Ion B. Project into | ormation | | |
| | e: Enter date here. | Completion Date: Enter | date here. |
| Project Start Date | | - | date here. |
| Project Start Date | e: Enter date here. | - | date here. |
| Project Start Date Location: Enter leg | Enter date here. al land description and/or GPS coordinates. Brief project overview. Must describe the | e purpose; methods and expected | |
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| Project Start Data Location: Enter leg Project Summary approximate project | e: Enter date here. al land description and/or GPS coordinates. Brief project overview. Must describe the footprint and area required and attach any | e purpose; methods and expected maps, plans or figures. | outcomes. Include |
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power lines, communication lines, etc.)

| decommi | generation: Describe wastes e issioning and any related activitie nd, water or air, etc). | | | | |
|----------------------------------|--|--|--|--|-------------------------------------|
| Are fun | nds being provided by AAN | DC for your project? | | □ Yes | □ No |
| | If yes, what Program? Ent | er name of program(s) | | | |
| Will thi | is project receive funding fi If so what department/ag | | | Yes | 🗆 No |
| Is there | e supplemental information | attached? | | □ Yes | 🗆 No |
| | ease describe: Describe the i assessme nd Description: | | ubmitted under se | parate cover. E.g | . Maps, plans, figures, |
| n C: Lai Is there A) | assessme nd Description: e surface water: Present on/or within 30 m | ents, etc. eters of your project | : boundary? | Yes | - No |
| n C: Lai Is there A) | assessme nd Description: e surface water: | ents, etc. eters of your project | : boundary? | | |
| n C: Lai Is there A) B) | assessme nd Description: e surface water: Present on/or within 30 m | ents, etc. eters of your project onsidered navigable? | : boundary? | Yes | _ No |
| n C: Lai Is there A) B) | assessme nd Description: e surface water: Present on/or within 30 m Within 30 meters that is co | ents, etc. eters of your project onsidered navigable? | : boundary? | Yes | □ No □ No □ River |
| n C: Lai Is there A) B) | assessme nd Description: e surface water: Present on/or within 30 m Within 30 meters that is co escribe the surface water: (a | ents, etc. eters of your project onsidered navigable? Check all that apply to th | t boundary? e project) | Yes Yes | □ No □ No □ River oodplain |
| n C: Lai Is there A) B) | nd Description: e surface water: Present on/or within 30 m Within 30 meters that is co escribe the surface water: (o Fresh water: | ents, etc. eters of your project onsidered navigable? <i>Check all that apply to th</i> Stream Dond Beach | t boundary? e project) Lake Reservoir Cove | ☐ Yes ☐ Yes ☐ Yes ☐ Wetland ☐ Active Fl ☐ Mud Fla | □ No □ No □ River oodplain |

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 si | te, gas station, oil and gas lease, etc.) |
|----------------------------------|---|---|
| | | |
| Current Land use: List past lar | nd uses (eg. Natural state, agricultural, waste | e site, gas station, oil and gas lease, etc.) |
| Adjacent Land uses: | (select all that apply): | |
| 🛄 Residential | 🗖 School | 🗖 Daycare |
| Commercial | Agricultural | |
| 🗖 Railway | \square Recreation area | Other - Describe here |
| Provincial or National Structure | onal Park, Conservation area Enter na | ame here |
| Utility Corridor (p | ipelines, gas lines, power lines, water lin | <i>es, etc.)</i> Describe here |
| Industrial <i>(oil and)</i> | gas, manufacturing, sawmill, etc.) Desc | ribe here |
| Describe any unique feature | s of the land: Describe here | |

Section D: Flora and Fauna:

Wildlife: *Is/are there any:*

| A) | Species at Risk in or adjacent to the proposed project area? | 🗆 Yes | 🗆 No | 🗆 Unknown |
|----|---|-------------|------------|-------------------|
| B) | Visit: <u>Species at Risk Public Registry</u> . Name species and describe habitat here Migratory Birds that use the area at any time during the year? | 🗆 Yes | 🗆 No | Unknown |
| , | Visit: Migratory Birds List Name species and describe use here | | | |
| C) | <i>Migratory Birds</i> (or eggs or nests) likely to be captured or killed? | Yes | 🛄 No | 🛄 Unknown |
| | Describe the circumstances and rational here | | | |
| D) | Fish or Fish Habitat that could be impacted by the project? | 🗆 Yes | 🗆 No | 🗌 Unknown |
| | Fish defined Section 2 of the Fisheries Act Fish Habitat defined Subsection | ction 34(1) | of the Fis | <u>heries Act</u> |
| | 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:

| | 🗆 Yes 🗖 No |
|---|------------|
| Describe any known sites of cultural/ historical/archaeological significance here | |
| re 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? If so, do you plan to conduct public consultation? | Yes Enter start date here | □ No □ No |

Section G: Comments and Other Information:

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

Section H: Contact Information:

| 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 | |
| Eman aduress. | Contact email | |

| 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 | |

| 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? \Box Yes Choose authority \Box No | | | | | |
| 2. Level of environmental review required: Choose level | | | | | |
| 3. Are there prescribed safeguards expected of the pro Describe safeguarded prescribed to the proponent in relat | • | | No | | |
| 4. Is there prescribed reporting expected of the propon Describe reporting requirements or insert CIDM Document | | Sec Yes of Terms of Referen | | | |
| 5. Will this project require land tenure? | 🗆 Yes | Choose an item. | □ No | | |
| 6. Will any other legal instrument(s) be required? | 🗆 Yes | Describe instrume | ent required No | | |
| 7. Will an expert department be engaged? | 🗆 Yes | Departments to b | e consulted. 🗌 No | | |
| 8. Is Aboriginal Consultation required/recommended? | | □ Yes | □ No | | |
| 9. Is public consultation/participation recommended? | | 🗆 Yes | 🗆 No | | |
| Comments: Enter any additional comments you consider warran though 8 above. | nted here i | ncluding any ration | al for selections in questions : | | |

| 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 |