

*Schedule A added by Bylaw 335*

**Schedule "A"  
District of Lake Country**

**Soil Removal or Deposit Application and Permit**

**Applicant Information**

(to be completed by applicant)

Business Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Civic Address \_\_\_\_\_

Legal Description \_\_\_\_\_

Business Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_

General Description of Proposed Soil Removal or Deposit \_\_\_\_\_

Estimated Quantity	Type of Material	Quantity
(a) to be removed	_____	_____
(b) to be deposited	_____	_____

\_\_\_\_\_  
Applicant's Signature

Approved by Municipal Council on \_\_\_\_\_.  
(date)

**Soil Permit issued** on \_\_\_\_\_ and valid until \_\_\_\_\_ with the following conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Municipal Official

\_\_\_\_\_  
Date