

Office Use Only	Date Received: (yy	vyy/mm/dd)	Application	#	
Print or type. Complete all sections.					
Note: All applicable application fees must be submitted with application for applicable fees go to: (https://novascotia.ca/just/regulations/regs/envfees.htm)					
Type of Applic	ation:				
□ New Application □ Renewal □ Amendment □ Transfer					
If applicable, provide the previous Approval #					
Section 1 – Ap	plicant				
If there is more than one applicant, the first applicant listed will be considered the primary applicant for this project. Attach a complete list of applicants with the information below.					
Company/Organization/Municipality					
Business number (BN) if applicable					
First name		_ Middle initial	Last name		
Phone Numbers: P	rimary	Ext	Secondary	Ext	
Fax	Email				
Civic/Street addres	s				
Mailing address (if different than Civ	vic)				
	Community		County		
	Province	Postal Code	Country		
Note: Following application decision, all correspondence will go to the applicant					
Preferred method of contact? Email Paper					



Section 2 – Application Contact

Is the Application Cor	itact the same a	s Section 1 – App	licant? 🗆 Yes 🗀 No)
If yes, please skip to S with the information b		is more than one	contact, attach a comp	lete list of contacts
Company/Organizatio	n/Municipality			
Business number (BN) if applicable $_$			
First name		_ Middle initial	Last name	
Phone Numbers: Primary		Ext	Secondary	Ext
Fax	Email			
Civic/Streetaddress_				
Mailing address (if different than Civic)				
	Community		County	
	Province	Postal Code .	Country	
Note: Following applic	ation decision, a	II correspondence	will go to the applicant	
Preferred method of c	ontact? 🗖 Em	ail 🛭 Paper		
Section 3 – Site	/Location of	f Proposed Ac	tivities	
	dentifying Eastin		Nova Scotia Land Reg e available at Nova Scot	•
If more than one Site,	Copy this sectio	n and attach for ea	ach Site.	
If applying for a Wetla	nd Alteration, s	pecify the Site Typ	e: 🗆 Alteration 🗅 0	Compensation
Site name				
For each property ass covers more than one			nformation below. If the litional information.	e activity/facility
Civic/Street address _				
(Community		County	



Property Identification # (PID)		
Topographical Map Number		
Coordinates: Easting	Northing	Zone
If there are multiple point location information for each.	s associated with this activity, pr	ovide the Easting and Northing
Additional directions to site (if ap	plicable)	
Section 4 – Activity Deta	ils	
Start Construction Date (yyyy/mn	n/dd)	
Start Date of Operations (yyyy/mi		
End Date of Construction (yyyy/m		
Wetland of special significance	☐ Yes ☐ No	
Wetland Type - Alteration		
	Size of Wetland (ha)	Size of Alteration (ha)
Salt Marsh		_
Fresh water Marsh – Shallow		_
Fresh water Marsh - Deep		_
Freshwater Marsh – Shoreline		_
Fen - Open		
Fen - Shrub		
Fen – Treed		
Bog – Open		
Bog – Shrub		
Bog – Treed		
Swamp – Shrub		
Swamp - Treed		
Vernal Pool		
Other		
Unknown		

Application

Wetland Alteration Approval



Wetland Type - Compensation (check (✔) all that apply) **Compensation Area** (ha) Type ☐ Salt Marsh ☐ Fresh water Marsh — Shallow ☐ Fresh water Marsh - Deep ☐ Freshwater Marsh — Shoreline ☐ Fen - Open ☐ Fen - Shrub ☐ Fen - Treed ■ Bog – Open ■ Bog – Shrub ■ Bog – Treed ■ Swamp – Shrub ■ Swamp – Treed □ Vernal Pool

Compensation Type (check (✔) all that apply)

Compensation Status Approved In Progress Not Started Type Restoration ■ Enhancement Creation Expansion ■ Research ☐ Study Education □ Other

If Other, specify _____

□ Other

■ Unknown



Section 5 – Supporting Documentation

All supporting documentation is to be submitted in accordance with the "Approvals Procedures Regulations." If applicable, the following documents must be submitted with this Application. However, additional information may be requested.

Note: A legend must be supplied for all mapping describing symbols used, scale and north orientation.