



Regulatory Approvals Centre

Company Name:

Main Flr, Oxbridge Place, 9820-106 St., Edmonton, AB, T5K 2J6

780/427-6311 Fax 780/422-0154

ENVIRONMENTAL PROTECTION AND ENHANCEMENT ACT

APPLICATION FOR A PESTICIDE SPECIAL USE APPROVAL

Please Note: A Pesticide Special Use Approval is required by any person (other than those listed below) who **applies** or **stores** a pesticide, or **washes pesticide application equipment** on, in or within 30 horizontal metres of an "open body of water". The following persons **do not** require a Special Use Approval:

- i) a person applying a **fish toxicant** to water in accordance with an authorization issued by the Director of Fisheries Management of Alberta Environmental Protection
- ii) a person applying a **vertebrate toxicant bait** on ice cover or on land within 30 horizontal metres of a frozen water body pursuant to a government pest control program, or
- iii) a certified applicator applying a pesticide in accordance with the Environmental Code of Practice for Pesticides
- iv) a person applying a pesticide on cultivated land

PART 1. APPLICANT DETAILS

Please type or print clearly in ink and mail your completed approval application to the address at the top of this page.

I hereby make application for a Special Use Approval in the province of Alberta as required by the **Pesticide (Ministerial) Regulation (A.R. 43/97)** and the **Approvals and Registrations Procedure Regulation (A.R. 113/93**, with amendments up to and including **216/96)** under the *Environmental Protection and Enhancement Act*, and in support of this application supply the following information:

Business Mailing Address: Stree	Street Address:			
Postal Code:	Postal Code:			
Authorized Representative:				
Name:	Title:			
Address: (if different from above)				
Postal Code: To	elephone: (business):			
Email: Fa	acsimile:			

Chief Executive Officer/Owner:				
Name:				
Address:				
Telephone:				
24-Hour Emergency Contact: (This individual should be familiar with the entire operation and be responsible for on-site decisions should an emergency occur.)				
Name:	1 /			
	(home): (facsimile):			
Authorizations:				
This application is submitted in accordance with the <i>Environmental Protection and Enhancement Act</i> and its Regulations and may require the applicant to submit additional information considered necessary to complete this form.				
I, the undersigned, acknowledge the above and attached information to be a true and accurate representation of my operation activities at the time of signing. Any changes to this information will be forwarded immediately to Alberta Environment.				
I understand that an inspection will be conducted to verify compliance with provincial legislation.				
Name of Authorized Representative (print)	Signature			
Title	Date			
If requiring any assistance with the completion	of your application, please contact an Alberta			
Environment office between the hours of 8:15 AM and 4:30 PM Monday through Friday:				

Northern Region	Northern Region	Central Region	Central Region	Southern Region	Southern Region
538-8054	427-7617	963-6131	340-7052	297-7891	382-4015

To be connected toll free from anywhere in Alberta, first dial 310-0000.

DISCLAIMER

The issuance of an approval pursuant to Part 2, Division 2 of the *Environmental Protection and Enhancement Act* does not relieve the applicant from complying with all other applicable legislation, whether federal, provincial, or municipal.

PART 2. PESTICIDE USE DETAILS

NOTE: USE ANOTHER COPY OF THIS FORM IF MORE THAN TWO PROJECTS ARE PROPOSED

PROJECT 1	PROJECT 2			
NAME AND TYPE OF WATER BODY	NAME AND TYPE OF WATER BODY			
LOCATION AND DIMENSIONS OF TREATMENT AREA (provide a diagram or attach a map - see the back of this page)	LOCATION AND DIMENSIONS OF TREATMENT AREA (provide a diagram or attach a map - see the back of this page)			
ang. and of action a map of the sact of this page)	ang an or attach a map see the saction this page)			
map/diagram attached yes ☐ no ☐	map/diagram attached yes □ no □			
LAND USE habitat □ roadside ditch □ grazing □ □	LAND USE habitat □ roadside ditch □ grazing □			
industry □ crop production □ recreation □	industry □ crop production □ recreation □			
* **				
other (specify) WATER USE (within 1.5 km of application site)	other (specify) WATER USE (within 1.5 km of application site)			
WATER USE (Within 1.5 km of application site)	WATER USE (Within 1.5 km of application site)			
habitat ☐ livestock water ☐ fishing ☐	habitat ☐ livestock water ☐ fishing ☐			
irrigation □ potable water □ industry □	irrigation □ potable water □ industry □			
swimming other (specify)	swimming other (specify)			
OUTFLOW? (LAKES/PONDS/ SLOUGHS ONLY)	OUTFLOW? (LAKES/PONDS/ SLOUGHS ONLY)			
yes □ no □	yes □ no □			
PESTICIDE NAME TARGET PESTS (BE SPECIFIC)	PESTICIDE NAME TARGET PESTS (BE SPECIFIC)			
P.C.P. NO.	P.C.P. NO.			
PESTICIDE NAME TARGET PESTS (BE SPECIFIC)	PESTICIDE NAME TARGET PESTS (BE SPECIFIC)			
P.C.P. NO.	P.C.P. NO.			
PESTICIDE NAME TARGET PESTS (BE SPECIFIC)	PESTICIDE NAME TARGET PESTS (BE SPECIFIC)			
P.C.P. NO.	P.C.P. NO.			
APPLICATION METHOD backpack □ hand-gun/hose □ boat □	APPLICATION METHOD backpack □ hand-gun/hose □ boat □			
cylinder truck/boom quad/boom	cylinder truck/boom quad/boom			
boomless (type)	boomless (type)			
aircraft (type)	aircraft (type)			
other	other			
PROXIMITY OF APPLICATION TO WATER (IF TREATMENT ON				
LAND)	LAND)			
metres	metres			
APPROXIMATE DATE(S) OF APPLICATION	APPROXIMATE DATE(S) OF APPLICATION			

l.	For each project, please attach a pest (vegetation, insect, turf disease) management strategy for problem species. The strateg must identify the management objective (elimination, population control, suppression of seed production, etc.), action level (level of infestation at which control will be initiated), surveillance to identify problem areas, and the strategy (chemical and non-chemical) that will be used to achieve management objectives.
2.	Has environmental monitoring of any kind been conducted under a previous approval for this activity? \square yes \square no If yes, attach a summary of the information gathered.
3.	Are contingency plans in place to deal with any pesticide spills during this activity? \square yes \square no
l.	Describe any public consultation activities that you have undertaken pertaining to this application (attach a separate page if necessary Include any written or verbal information provided as well as any opportunities for public input. Describe any concerns expressed by the public and how these concerns were addressed.
5.	Name and type (daily/weekly/biweekly) of newspaper circulated in the vicinity of the treatment location:
	NAME TYPE

WAIVER

For the purposes of regulating the use or application of pesticides in or near open bodies of water under the *Environmental Protection and Enhancement Act*, and in accordance with Section 3(2) of the **Approvals and Registrations Procedure Regulation**, being **Alberta Regulation 113/93**, with amendments up to and including **Alberta Regulation 216/96**, the following requirements as specified in Section 3(1) of the **Approvals and Registrations Procedure Regulation** are hereby waived.

Sections 3(1) (d), (e), (f), (j), (l), (m), (n), (p) and (r).

DISCLAIMER

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Special Use (Jan 2004)