

## PROJECT INFORMATION FORM COMMERCIAL LIVESTOCK OPERATIONS

Pursuant to Section 9 (1) of the Environmental Protection Act

Personal information on this form is collected under Section 31(c) of the *Freedom of Information and Protection of Privacy Act* R.S.P.E.I. 1988, c. F-15.01 as it relates directly to and is necessary for evaluating an application for Development and/or an application for an Environmental Impact Assessment. If you have any questions about this collection of personal information, you may contact the coordinator, Environmental Assessment Section, Prince Edward Island Department of Communities, Land and Environment, (902) 368-5274.

	(Please Print)  NAME AND ADDRESS OF OWNER:	
	Owners Name:	
	Business Name:	
	Mailing Address:	_Postal Code
	Phone: (w) Fax E-mail	
2.	LOCATION OF PROJECT:	
	Property Tax #Community CountyRoad Name or Rte. #	
	CountyRoad Name or Rte. #	_Civic Address #
	<b>Note:</b> attach a <u>property map</u> showing location of project and location of any existing and proposed facilities (i.e., buildings, mais service roads, well(s) and wastewater treatment systems).	
3.	DESCRIPTION OF PROJECT: (Please Check ✓)  (A) Type of Proposal: Expansion to Existing Livestock and/or Poultry Operation New Livestock and/or Poultry Operation Change of Use of Farming Operation	
	(B) Type of Construction: New Building(s)Addition to BuildirOther (please specify):Other (please specify):	ng(s) Building
	Dimensions of Proposed Building(s):	m
Note: attach a floor plan showing proposed building layout		t
	(C) Type of Manure Storage Structure(s): (If Proposed)In-barn (under floor)Earthen LagoonIn-barn (bedding pack)Concrete Pad (curbed)Other (please specify):	Concrete Tank
	Storage capacity of proposed manure storage structure(s)?  Dimensions of proposed manure storage structure(s)?  Who will be designing plans for your manure storage facility? (//	<u>m</u> .
	When do you plan to start construction of your project?	
	(D) Other (Please Check ✓)  Do you plan to construct a new well?YesNo  Do you plan to construct a wastewater treatment system for se wastewater?YesNo  Do you plan to have an exercise yard and/or feedlot?Yes	wage and/or milk parlor
4.	LOCATION OF PHYSICAL AND NATURAL FEATURES:  Please state distance from project to the nearest:  Watercourse/Wetland m. Well  Public Road boundary m. Property Line  Residential Dwelling (not owned by applicant) m.	<u>m</u> . <u>m</u> .

## 5. DESCRIPTION OF EXISTING OPERATION: (A) Existing Animals (Describe type and number of animals normally found on the farm):\_\_\_\_\_ (B) Manure Management: (Please Check ✓) i) Type of Manure Handling: \_\_\_\_Semi-Solid (slurry) \_\_\_\_Liquid \_\_\_\_Solid ii) Type of Existing Manure Storage Structure(s): \_\_In- barn (under floor) \_\_\_\_Earthen Lagoon \_\_Concrete Tank In- barn (bedding pack) Concrete Pad (curbed) Other (please specify): Total manure storage capacity of your existing structure(s)?\_\_ How many acres do you have for manure spreading?\_\_\_ Owned Rented Do you have an existing exercise yard or feedlot?\_\_\_\_\_Yes\_\_No If, YES, what is the distance from the nearest: Domestic well <u>m</u>. Watercourse <u>m</u>. Public Road Boundary <u>m</u>. (C) Wastewater Management If you have a dairy operation, how do you dispose of milk parlor/milk room wastewater? (D) Proposed Additional/New Animals:(Describe type and number of NEW animals proposed): \_ (E) Other What is your management plan for the disposal of solid waste (dead stock, plastics, feed bags, etc.)?: 6. PUBLIC INVOLVEMENT: Description of any consultation with neighbouring landowners concerning your project proposal: Date Signature of Owner

Please submit completed Project Information Form with your Application for Development (Building). If the project does not require a Development (Building) permit, please submit to:

Environmental Land Management Section
Department of Communities, Land and Environment
PO Box 2000, Charlottetown, PE C1A 7N8

Attention: Environmental Assessment Officer

For assistance with this form, please contact the Environmental Assessment Officer at (902)368-5049 or <a href="mailto:dethompson@gov.pe.ca">dethompson@gov.pe.ca</a>