



Corporation of the  
**Township of Tay**

450 PARK ST.  
P.O. BOX 100  
VICTORIA HARBOUR  
ONTARIO L0K 2A0

(705) 534-7248  
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## **PERMIT APPLICATION FOR DOCK AND WORKS ON THE TOWNSHIP OF TAY WATER LOT**

This permit application should be utilized by those persons proposing a dock, shoreline protection, dredging or rock removal or relocation to be located on the Township of Tay Water Lot abutting a residential property.

It should also be noted that this Permit does not supersede the requirements of the Ontario Building Code Act, the Municipal Act or the Planning Act, the requirements of the Ministry of Natural Resources, Department of Fisheries and Oceans, Canadian Coast Guard, or any other applicable legislation. Be advised that in water timing is regulated by the Ministry of Natural Resources. Contact the Ministry in Midhurst for more details at 705-725-7500.

**Application Fee \$100.00 or pursuant to the Fee By-law for the Township of Tay.**

**Municipal Address:** \_\_\_\_\_

**Registered Plan No.: (if applicable)** \_\_\_\_\_

**Owner of Property abutting the Water Lot:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No.: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

**Contractors Information (if applicable):**

Contractors Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No.: Business \_\_\_\_\_ Cell \_\_\_\_\_

**Attach** a survey or accurate sketch, showing the size, property lines, and shape of the property and the abutting properties, existing buildings and docks on subject property and abutting properties, water's edge and accurate measurements drawn to scale. Clearly identify and label the dock as proposed and the setbacks proposed for the dock. Photographs of the site are helpful. Lack of sufficient information in completing this application could result in processing delays.

**Description of work to be undertaken:**

Briefly Describe the work proposed and materials to be used: \_\_\_\_\_

**Attach Proof of Insurance**

**Insurer’s Company Name:** \_\_\_\_\_

**Policy No.:** \_\_\_\_\_

**Liability of Owner and Indemnification**

Indemnification – The Owner covenants and agrees to indemnify the Township from all claims, costs and causes or action of any nature or kind whatsoever arising out of the use of the Water Lot.

Insurance Policy – Prior to the commencement of any of the work which is authorized by the permit, the Owner shall deposit with the Township a certified copy of a current policy of insurance, held by the Owner in a form which is satisfactory to the Township, insuring for the joint benefit of the Owner and the Township against any liability that may arise out of the Ownership, construction or maintenance of the docks or works within the Water Lot or use of the Water Lot or that may accrue to the Township in consequence of this permit. The insurance policy shall,

- (i) be kept in force for so as long as the Owner utilizes the Water Lot,
- (ii) provide coverage of at least Two Million (\$2,000,000.00) Dollars or such other amount as the Township, in its discretion, may require from time to time,
- (iii) name The Corporation of the Township of Tay as an additional insured party, and
- (iv) contain an endorsement which requires the insurer to notify the Township at least 15 days before the cancellation of the policy for any reason.

Insurance Policy – The Owner shall, as required from time to time by the Township, provide proof that the required policy of insurance is in full force and effect.

Claims In Excess Of Coverage - The issuance of the insurance policy shall not be construed to relieve the Owner in any way from its responsibility for any claims for which it is liable or against which it has indemnified the Township that may exceed the amount of the insurance coverage.

Owner(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR DEPARTMENT USE ONLY**

DATE APPLICATION RECEIVED: \_\_\_\_\_

<u>REVIEW AND APPROVAL</u>	<u>DATE</u>	<u>APPLICATION NUMBER</u>
PLANNING STAFF	_____	_____
COMMITTEE (if required)	_____	_____
COUNCIL (if required)	_____	_____