



**Request for Administrative Review Form**  
**Under Section 8 of O. Reg. 41/24**

130 Conservation Road, P.O. Box 10427, Thunder Bay, ON P7B 6T8  
Telephone 344-5857, Fax 345-9156, Email: info@lakeheadca.com, [www.lakeheadca.com](http://www.lakeheadca.com)

<b>Office Use Only</b>
Application #
Date received:

08.29.24

<b>Date of Request</b>							
<b>SECTION 1- Applicant Information/Project Location</b>							
<b>Applicant Information:</b>							
Name:							
Organization/Company (if applicable)							
Mailing Address:		Postal code:					
		Fax:					
Email:		Telephone:					
		Cell:					
<b>Subject Property Location: Same as above :</b> <input type="checkbox"/>							
Municipal Address:							
Municipality:							
Legal Address: (if no fire number issued)		Lot:		Concession:		Registered Plan:	

In accordance with the LRCA's Process for Administrative Review Policy, a request for administrative review applies to permit applications made under Section 28.1 of the *Conservation Authorities Act*, and under the following circumstances. Check all that apply:

- I [the applicant] believe I have submitted all information required for a complete application and I have not received written confirmation from the Authority within 21 days upon submission of the application. I would like confirmation from the Authority that my application has been received by this office and is complete.

The permit application for my proposed project was submitted on  
[Date:] \_\_\_\_\_.

- I [the applicant] disagree with the Authority's determination that the application for my permit is incomplete.

Please explain:

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I [the applicant] am of the view that the Authority's request for other information, studies or plans is not reasonable.

Please explain:

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The proposed project has not commenced. **YES/NO**

I have paid the CA permit application fee for the proposed project. **YES/NO**

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Signature of Applicant

Date

**To be completed by LRCA upon receipt of form:**

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Signature of LRCA Chief Administrative Officer

Date Received

