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| --- | --- | --- |
| A picture containing logo  Description automatically generated | **Restoration – Additional Information** Physical Address: 6534 - 100 AvenueFort St. John, B.C. V1J 8C5Mailing Address: BC Energy RegulatorBag 2, Fort St. John, B.C. V1J 2B0Phone: (250) 794-5200 |  |

This FOrM is a mandatory attachment to be uploaded in THE APPLICATION MANAGEMENT SYSTEM (AMS), under the attachments tab, as an “Other” attachment. Further guidance regarding the restoration application can be found in the AMS Restoration release guide July 2023

THIS IS AN AUDITABLE DOCUMENT.

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| **ADMINISTRATION** | **A** |
| Applicant Name:  | Application (AA) Number:  |
| Revision Number, if applicable: |
| **OTHER REQUIRED INFORMATION** | **B** |
| 1. Identify the term (days/months/years) required for the activity:
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| 1. What is the restoration work that will be undertaken, including tree removal, clearing, works in or around water, and any proposed follow-up or monitoring.
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| 1. How will fire risks be mitigated?
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| 1. Describe the current state of the land prior to the proposed restoration works:
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| 1. Are there any other permits required through another regulatory agency or Ministry (e.g., Wildlife Act)? If so, please list the responsible agency/ministry, tenure number, if available, and a brief description.
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| **ENVIRONMENTAL IMPACTS** | **C** |
| 1. Will any works be completed within or adjacent to the riparian zone (30 meters) of any water body? Yes [ ]  No [ ]
2. Will the project result in changes to land drainage or require water diversion? Yes [ ]  No [ ]
3. Will the project result in potential for flooding? Yes [ ]  No [ ]
4. Will there be any use of pesticides or herbicides during construction, operations and/or maintenance? Yes [ ]  No [ ]
5. Will the project result in adverse effect to wildlife or wildlife habitat (BC Wildlife Act)? Yes [ ]  No [ ]
6. Will the project threaten or endanger species at risk in the area? Yes [ ]  No [ ]
7. Will the activities or works fall under the Wildlife Act as an industrial activity, prescribed activity or high risk activity?

Yes [ ]  No [ ]  If Yes, please describe the effect and the management or mitigation strategies around the environmental impact or potential environmental impact.1. How will the risk of invasive plants be mitigated?
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| **SOCIAL IMPACTS** |  |
| 1. Are there any land and resource management, coastal plans, provincial, regional growth strategies or local government plans with zoning or management policies or use restrictions in place that could limit or preclude your proposed use of the land? Yes [ ]  No [ ]
2. Will the project result in changes to public, private or stakeholder access? Yes [ ]  No [ ]
3. Will your project result in any affects to recreational uses in the area? Yes [ ]  No [ ]
4. Will your project be near or affect any utilities? Yes [ ]  No [ ]
 |  |
| **SIGNATURE** | **E** |
|  I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_hereby attest that the information contained herein is true and correct: |
|  (Print Name) |
| AUTHORIZED SIGNATORY OF APPLICANT COMPANY |  |