

PLEASE DETACH AND SUBMIT SECTION 1, (PARTS 1-9)

**SECTION 1 – PART 1 – APPLICANT CONTACT INFORMATION**

*To be completed by applicant (Please use full legal name)*

Given Name: <u>KEMM</u>	Middle Name: <u>DIANE</u>	Surname: <u>WARNER</u>
Registered or Incorporated Business Name:		
Street/Box/Bag:		
City/Town:	Territory/Province/State:	Postal/Zip Code:
Country: <u>CANADA</u>	Home Phone:	Bus. Phone:
Email:	Preferred method of contact:	

*To be completed by co-applicant (If required)*

Given Name:	Middle Name:	Surname:
Registered or Incorporated Business Name:		
Street/Box/Bag:		
City/Town:	Territory/Province/State:	Postal/Zip Code:
Country:	Home Phone:	Bus. Phone:
Email:	Preferred method of contact:	

**PART 2 – PROJECT INFORMATION**

Type of application: <input checked="" type="checkbox"/> Title <input type="checkbox"/> Lease <input type="checkbox"/> Licence			
Size of area applied for: (hectares)			
Tenancy: (For applications directly related to existing parcels, tenancy must be the same as currently on title). All trapping & Big Game Outfitter dispositions are issued under the name in which the Concession is registered. <input checked="" type="checkbox"/> Sole Owner <input type="checkbox"/> Joint Tenancy <input type="checkbox"/> Tenants in Common			
* Joint tenancy – upon death, co-owner interest passes to other co-owner * Tenancy in common – upon death, interest passes to heirs or estate			
Is your application to extend an existing titled lot (Lot Enlargement)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, Legal Description:	Lot No.	Certificate of Title No.	Size of existing titled parcel (hectares)
Applications must be made under one of the land application policies listed below. Please read the relevant policy and indicate which policy you are applying under.			
<input checked="" type="checkbox"/> Rural Residential	<input type="checkbox"/> Trapping Cabin	<input type="checkbox"/> Institutional/Non Profit	
<input type="checkbox"/> Commercial/ Industrial & Lot Enlargement (Includes Utility)	<input type="checkbox"/> Water Lot Lease	<input type="checkbox"/> Big Game Outfitting	
<input type="checkbox"/> Lot Enlargement (Residential & Recreational)	<input type="checkbox"/> Other (Specify) _____		
* If approved, only the use indicated in this application or as indicated by the Land Management Branch will be permitted.			

### PART 3- PROJECT LOCATION

Common or Traditional name:		
Name of community or Local Area Plan:	KENO CITY	<input type="checkbox"/> N/A
Name of applicable zoning regulation/ municipal by-law:		<input type="checkbox"/> N/A
The application area is located within the following First Nations Traditional Territory (s). (Check all that apply)		
<input type="checkbox"/> Carcross/Tagish First Nation	<input type="checkbox"/> Little Salmon/Carmacks First Nation	<input type="checkbox"/> Teslin Tlingit Council
<input type="checkbox"/> Champagne & Aishihik First Nation	<input checked="" type="checkbox"/> First Nation of Nacho Nyak Dun	<input type="checkbox"/> Tr'ondëk Hwëch'in First Nation
<input type="checkbox"/> Kluane First Nation	<input type="checkbox"/> Ross River Dena Council	<input type="checkbox"/> Vuntut Gwitchin First Nation
<input type="checkbox"/> Kwanlin Dün First Nation	<input type="checkbox"/> Selkirk First Nation	<input type="checkbox"/> White River First Nation
<input type="checkbox"/> Liard First Nation	<input type="checkbox"/> Ta'an Kwächän Council	<input type="checkbox"/> Tetlit Gwich'in Council

### PART 4 - VERIFICATION OF SITE COORDINATES

The applicant is responsible for providing accurate GPS coordinates of at least 4 corners of the application area. Land Management Branch will request an inspection of the application area by a Natural Resource Officer as part of the Land Review Process. Inspections of the site will include verification of site coordinates, geographical suitability and identify any potential site specific issues.

Latitude/Northing			
Longitude/ Easting			
Map Sheet Quad:	Nearest community: MAYO	Distance: 60	km
<b>To be completed by applicant prior to submission to the Land Management Branch:</b>			
I agree that the coordinates written above are accurate to the best of my knowledge.			
Applicants Signature		May 14, 2018	Date
Co-Applicants Signature			Date
* Applications not signed by the applicant will be returned for signing before they can proceed any further.			

### PART 5 - SITE INFORMATION

Answer the questions below to the best of your knowledge. Provide any supporting documentation you may have regarding geographical features, soil type, fish and wildlife information etc.

Are there any significant landscape features present? (bench, terraces, steep slopes)		<input type="checkbox"/> Yes, if yes explain <input type="checkbox"/> No
Type of vegetation (shrubs, trees gasses etc.)	willows + grass	
Are there any potential hazards in or adjacent to the application area? (flooding, erosion, landslides, wild land fires)		<input type="checkbox"/> Yes, if yes explain <input checked="" type="checkbox"/> No
Is there any known archaeological, heritage or historical value related to the site or area?		<input type="checkbox"/> Yes, if yes explain <input checked="" type="checkbox"/> No
Are there existing trails or pathways located on or adjacent to the application area?		<input type="checkbox"/> Yes, if yes explain <input checked="" type="checkbox"/> No
Identify any known fish and wildlife habitat, game trails, mineral licks or populations within or near application area.		
Will the proposed project overlap with any registered trapping concessions(s)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	If yes, concession #
If yes, have you contacted the owner/operator of the trapping concession?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what was the outcome of any discussion?	

Will the proposed project overlap with any registered outfitting concessions(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		If yes, concession #
If yes, have you contacted the owner/operator of the outfitting concession?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what was the outcome of any discussion?	
Will the proposed project overlap with any mineral claims(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		If yes, claim #
If yes, have you contacted the owner/operator of the mineral claim?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what was the outcome of any discussion?	

### PART 6- SERVICING REQUIREMENTS

The following information is required for subdivision approval review in accordance with the *Subdivision Act and Regulations*.

Will a well for the extraction of groundwater be established on the site?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If no, how and from where will water be provided?
Will a septic system be installed at the site?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, how will it be installed?
	If yes, have you contacted Environmental Health?
How and where will garbage be disposed?	
<i>Taken by applicant to local dump</i>	
Are there any overhead or underground utilities (e.g. electricity, telephone) located within or adjacent to the application area?	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, explain fully.
<i>There is a power line adjacent to the property</i>	
Will power and/or telephone lines be established to/on the site?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please describe the nature to the lines and their location.
Will any petroleum products be stored at the site?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, will a petroleum fuel storage facility be established at the site?
Is the application area presently served by a fire department?	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give name and location
<i>Koro city volunteer fire department, 500mts.</i>	
What is the location of and distance to nearest school and school bus route? (Where applicable)	

**PART 7 - ACTIVITY INFORMATION**

The following information will assist in determining whether the application requires an assessment under the *Yukon Environmental and Socio-economic Assessment Act (YESAA)*. If an assessment is required, the applicant will be required to complete and submit a Form 1 application to the Designated Office under YESAA.

Complete the questions below. Attach a separate sheet if necessary. Failure to provide clear and concise detail on project activities may result in significant delays in the application review process.

**Describe all land based activities to be carried out on the applied for area. Activities such as construction of buildings or structures, clearing, cutting, drilling, burning of debris, digging or any other earthworks must be clearly identified. Include use and type of any heavy machinery to be used.**

ZERO

**Provide an estimated timeline to complete development, including site preparation, construction, operation, maintenance and decommissioning.**

Please provide a detailed rationale for acquiring the land, and include a site plan to show how you will utilise the parcel if approved. If you are applying for a lot enlargement provide a detailed site plan of your existing titled lot and the enlargement area, detailing how you will fully utilise the enlargement area.

I located the survey posts at back of property but could not find the posts at the front of the property. Using the site plan and the hydro pole at the front of the property for a reference point, we put up poles with flagging and ran lines from back posts up to the front. Thinking I was well within my property lines, I built my cabin and found out last year that I had built my cabin partially onto the adjacent lot. Lot No. 35. Therefore I am applying <sup>for</sup> a lot enlargement so as to avoid any problems in the future should the Government decide to sell lot 35. Would like to make my property legal ~~by~~ through lot extension.

**PART 8 – APPLICANT / OWNER CONSENT**

I/we hereby acknowledge and confirm that the filing of this application does not grant me any rights to occupy or use the land for which I have applied prior to approval and completion of all the conditions attached to the disposition, should this application be approved.

I/we certify that all submitted information is true and correct, to the best of my/our knowledge and belief.

I/we understand that any misrepresentation in this application may invalidate this application and may result in the revocation of any disposition resulting from the misrepresentation.

I/we acknowledge that the information contained in or attached to this application is being collected under the authority of the *Lands Act*, the *Territorial Lands (Yukon) Act* and the *Subdivision Act* to be used for the purpose of reviewing the request for land. It will be made available to government and to the public as part of the review process as per the *Access to Information and Protection of Privacy Act*.

I/we hereby grant to Yukon government inspectors the right of access to the proposed site for inspection purposes at any time until title has been transferred or the lease/license has expired.

I/we have read all of the information contained in this application or have had it explained by a third party and fully understand it.

A written request to keep business information confidential is attached.  Yes  No

I/we hereby authorize Yukon government, Land Management Branch to apply the Yukon government, Land Planning Branch for the purpose of Subdivision Approval on my/our behalf if this application is approved.

I/we have read the relevant Policy(ies) and believe to the best of my knowledge that my application is in compliance with the requirements of the Policy(ies).

**SIGNATURE**

Applicant \_\_\_\_\_ Co-applicant \_\_\_\_\_

Date: MAY 14, 2018 Date: \_\_\_\_\_

**FOR INTERNAL USE**

LMB or District Office Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

**PLEASE RETAIN A PHOTOCOPY OF THIS APPLICATION FOR YOUR RECORDS**