 

**Notice of Project**

Surface Mines & Projects

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| **General Information *(you must complete this part)*** | | |
| Name of Owner | Name of prime contractor *(if different from owner)* | Name of consulting firm  Name of person in charge of project |
| Address *(street, city, postal code)* | Address *(street, city, postal code)* | Job title  Telephone *(please include area code)*  Name of person completing this form  Telephone *(please include area code)* |
| Employer Account Number | Employer account number | Project start date *(yyyy-mm-dd)*  Anticipated duration of project  *hours*  *days*  *month* |
| Emergency Response plan developed *(must be provided upon request) yes*  *no* | | |
| Ground support plan available *yes*  *no* | | |
| *Project site location (indicate street address and city. if available, describe general geographical location – road, kilometre latitude/longitude, etc. – and nearest town. Attach a map if necessary.)* | | |

**only complete the section pertaining to your project**

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| **Surface mine project, surface exploration project, project requiring the use of explosives, or diamond drilling operation**  **(OH&S Regulation (15.02)(b)(c)) – At least one months’ notice prior to start required**  **Resumption after a cessation of production of four months or more**  **(OH&S Regulation (15.02)(e)) – At least two weeks notice required before operations are to resume** | | | |
| Exploration | Development | Production | Diamond Drilling |
| Access  Road  Air  Water |  | Proposed hours of work | Maximum number of workers |
| New operation  Resumption of operation  Date operation ceased *(yyyy-mm-dd)*  Attach appropriate plans, drawings, and reports as required by OH&S Regulation 15.03 | | Planned Activities  Line Cutting  Claim Staking  Soil Sampling  Geological Surveying  Geophysical Surveying  Land Surveying  Other *(explain)* | |