



**CODE OF PRACTICE FOR COMPOST FACILITIES
REGISTRATION FORM
SMALL COMPOST FACILITIES
(<20,000 tonnes/year of feedstock)**

1. GENERAL INFORMATION:

Applicant Name: WESTLOK REGIONAL WASTE MANAGEMENT COMMISSION

Mailing Address: 59424-2226 WESTLOK AB. T7P 2P4

Legal Land Description for Compost Facility: NE 1/4 SEC 27-59-26-4

Contact Person: TOM MOORE

Phone Number: 780-307-2456

Fax Number: 780-349-2995

2. TECHNICAL INFORMATION:

- (a) Please provide the following information as specified in the Code of Practice for Compost Facilities ("the Code"):
- (i) copies of the site investigation, compost facility design and groundwater monitoring system as specified in sections 6(1) to 6(3) inclusive of the Code where applicable; and
 - (ii) a copy of the operations plan as specified in Section 7 of the Code.
- (b) If applying for alternate groundwater quality performance standards, as specified in Section 8(3) of the Code, please provide documentation supporting the request for alternate performance standards.

3. OTHER INFORMATION

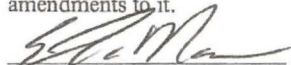
Please provide:

- (a) a copy of the development approval issued by the local municipal authority;
- (b) an overview of the public's involvement in the siting and planning of the compost facility.

(c) where appropriate, a copy of the field approval issued under section 19(1)(c) of the Public Lands Act; and

(d) the rationale for the compost facility, in writing.

I acknowledge that I have reviewed a copy of the Code of Practice for Compost Facilities, and that I am bound by the provisions of the Code and any subsequent amendments to it.

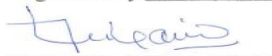

Applicant Signature

Sept 8, 2021
Date

For Office use only:

Date Received: September 8, 2021

Registered by: Annette Vawter


Director's Signature

September 10, 2021
Date

Registration Number: 476674-00-00