

Statement of Completion Transit Projects

For Office Use Only

Reference Number Initials

Date (yyyy/mm/dd)

General Information and Instructions

General

The information provided on this form is collected under the authority of the Ministry of the Environment, Conservation and Parks Transit Project Assessment Process as prescribed under Ontario Regulation 231/08 of *the Environmental Assessment Act.*

Instructions

- 1. Questions regarding the completion and submission of this form should be directed to the Client Services and Permissions Branch at 416-314-8001 or 1-800-461-6290.
- 2. Please send the completed form to:

Ministry of the Environment, Conservation and Parks Director, Environmental Assessment Branch 135 St. Clair Avenue West, 1st Floor Toronto ON M4V 1P5 Fax: 416-314-8452

- 3. If additional space is needed, please attach a separate sheet.
- 4. Please print or type all information clearly.

Proponent Information

Proponent Name (legal name of individual or organization) Ontario Northland Transportation Commission

Contact Person

Last Name Perepeluk		First Name Krystal	Middle Initial		
Telephone Number705-471-6813ext.	Fax Number	Email Address Krystal.Perepeluk@on	Email Address Krystal.Perepeluk@ontarionorthland.ca		
Proponent Type					
Municipal Vrovincial Crown Corpo		n Corporation 🗌 Federal	Private Sector		
☐ Other (describe) ►					
Co-proponent Informati	on				
Check here if more than one	e proponent				

Name(s) of Co-proponent(s)

Attach completed and signed Additional Proponent Information form for each co-proponent.

Description				File name		
Attach File(s)	Remove File(s)	View File(s)				
Proponent Ma	iling Address					
Civic Address						
Unit Number	Street Number 555	Street Name Oak Street East	t			PO Box

Delivery Designator							
Rural Route Su	uburban Se	ervice	Mobile Route	General Delive	ery 🗸 N/A		
Delivery Identifier	Delivery Identifier						
Municipality/Unorganized Tow	vnship Pro	ovince		Country		Postal Code	
North Bay	Or	ntario		Canada		P1B 8L3	
Project Information							
Project Name Northlander Passenger Rai	il Service -	- Timmir	ns-Porcupine Station				
If project is a building, comple	ete A. If proj	ject is a l	inear facility, complete E	3.			
A. Building							
Site Address – Street informat information includes street nu				mbering and stree		r (identifies type of suite & number)	
Non Address Information (incl PIN: 653860216, located a Street abuts the site to the	djacent to	the Sarj	eant Propane at 305 I	Falcon Street, P	orcupine, ON, P0		
B. Linear Facility							
Brief Project Description							
Date Notice of Commenceme	ent	Date No	otice of Completion of E	nvironmental	Date Minister's Not	ice given	
distributed (yyyy/mm/dd) (date publication)			Report given (yyyy/mm/		(yyyy/mm/dd)		
2024/05/30	2025/04/03 2025/05/15						
Were any conditions imposed	by the Min	ister?					
Yes 🗸 No							
Were any notices to suspend	the 120-da	y period	given?				
✓ Yes No							
If yes, provide number of days project timelines were suspended 189							
Were any objections submitte	ed to the Mir	nister?					
Yes Vo							
Was a Revised Environmenta	al Project Re	eport pre	pared?				
Yes 🗸 No	-						
If yes, enter the date below							
Date Revised Environmental Project Report submitted (yyyy/mm/dd) Date Minister's Notice given (yyyy/mm/dd)							
Location of Public Avai	ilable Do	cumen	tation				
		Sumen					

Same as Site Address

Proponents are required to retain, either on site or in another location where they will be readily available, any publicly available pre-planning reports/information; Environmental Project Report; Revised Environmental Project Report; Addendum to Environmental Project Report; and all given or received notices and Statements of Completion prepared under the Transit Project Assessment Process, as well as documentation of any commitments made by the proponent to address concerns in any of the above-noted reports.

✓ Civic Address

Unit Number	Street Number 555	Street Name Oak Street East		PO Box
Municipality/Unorg North Bay		ntario	- ,	Postal Code P1B 8L3

Survey Address

Geo Reference (Non Address Information)

Description	Map Datum	Zone	Accuracy Estimate	Geo-Referencing Method	UTM Easting	UTM Northing
Southwest corner of property						
Physical location of front door						

Contact Information about project documentation

Contact Person				
Last Name		First Name		Middle Initial
Perepeluk		Krystal		
Telephone Number705-471-6813ex	Email Address Krystal.Perepeluk@ontario		Website containing project of https://www.ontarionorthla	

Statement of Proponent

I, the undersigned hereby declare that, to the best of my knowledge, the information contained in this Statement is complete and accurate and I have complied with the Transit Project Assessment Process requirements set out in Ontario Regulation 231/08 under *the Environmental Assessment Act*.

I, the undersigned, intend to proceed with the above-noted project in accordance with the: (check only one)

Environmental Project Report

Environmental Project Report, subject to the conditions set out in a Minister's Notice

Revised Environmental Project Report

I have the authority to bind the proponent.

By checking this each of the undersigned acknowledge that in providing their name on the applicable line below in electronic form will constitute a signature for the purposes of the *Electronic Commerce Act, 2000*, S.O. 2000, c. 17.

Name	Title	
Krystal Perepeluk	Director	
Signature	Date (yyyy/mm/dd)	
L'appleule	2025/05/16	

Save Form

Print Form

Clear Form