

**Notice of Request for Drain
Major Improvement
Drainage Act, R.S.O.
1990, c. D.17, subs. 78 (1.1)**

To: The Council of the Corporation of the Municipality of North Middlesex

Re: BROWN-ROSE DRAIN

(Name of Drain)

In accordance with section 78 (1.1) of the *Drainage Act*, take notice that I, as owner of land affected, request that the above mentioned drain be improved.

The Major Improvement Project work being requested is (check all appropriate boxes):

- ☐ Changing the course of the drainage works;
- ☐ Making a new outlet for the whole or any part of the drainage works;
- ☐ Constructing a tile drain under the bed of the whole or any part of the drainage works;
- ☐ Constructing, reconstructing or extending bridges or culverts;
- ☐ Extending the drainage works to an outlet;
- ☒ Improving or altering the drainage works if the drainage works is located on more than one property;
- ☐ Covering all or part of the drainage works;
- ☐ Consolidating two or more drainage works; and/or
- ☐ Any other activity to improve the drainage works, other than an activity prescribed by the Minister as a minor improvement.

Provide a more specific description of the proposed drain major improvement you are requesting:

Replacing the Brown-Rose Drain to today's drainage coefficient.

Property Owners

- Your municipal property tax bill will provide the property description and parcel roll number.
- In rural areas, the property description should be in the form of (part) lot and concession and civic address.
- In urban areas, the property description should be in the form of street address and lot and plan number, if available.

Property Description

Con 2, Lot 14

Ward or Geographic Township

former East Williams

Parcel Roll Number

39-54-042-010-06800-0000

If property is owned in partnership, all partners must be listed. If property is owned by a corporation, list the corporation's name and the name and corporate position of the authorized officer. Only the owner of the property may request a drain improvement.

Ownership

Corporation

If you need to provide additional information, please attach along with this form.

Corporation (The individual with authority to bind the corporation must sign the form)

Name of Signing Officer (Last, First Name) (Type/Print)

Van Deuren, John

Position Title

President

Name of Corporation

Triple A Acres Ltd.

I have the authority to bind the Corporation.

Signature



Date (yyyy/mm/dd)

2025/06/11

Enter the mailing address and primary contact information of property owner below:

Last Name

Van Deuren

First Name

John

Middle Initial

Mailing Address

Unit Number

Street/Road Number

10455

Street/Road Name

Argyle St

PO Box

City/Town

Ailsa Craig

Province

ON

Postal Code

N0M 1A0

Telephone Number

Cell Phone Number (Optional)

519-476-2951

Email Address (Optional)

To be completed by recipient municipality:

Notice filed this 16 day of June 20 25

Name of Clerk (Last, First Name)

Sadler, Joanne

Signature of Clerk

