

Ministry of Agriculture, Food and Rural Affairs 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: Mud Creek 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:

## **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 NB, Lot 21, W Pt. Lot 20			
Ward or Geographic Township	Parcel Roll Number		
McGillivray	39-54-000-050-11100-0000		

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	Owners	ship
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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 Off	icer (Last	First Name)	(Type/Print)
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Van Osch, Gerald

Name of Corporation

Van Osch Farms Limited

I have the authority to bind the Corporation. Signature

Date (yyyy/mm/dd) 2025/06/27

Presiden

Position Title

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

Last Name VanOsch		First Name Gerald	Middle Initial
Mailing Addres	15		
Unit Number	The second s	oad Name	PO Box
City/Town Oredition	Allsa Craig	Province ON	Postal Code NOM-1MO / A U
Telephone Num	ber Cell Phone Number 519-476-1957	Optional) Email Address (Optional)	Vanosal farms, com
To be completed	by recipient municipality:		
Notice filed this	27th day of June	20 25	
Name of Clerk (I	.ast, First Name)	Signature of Clerk	
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