



**City of Markham - Sanitary Sewers**

**(to be read in conjunction with MECP Form SS1 and Approval 021-W601)**

**Part 1 - Environmental Compliance Approval Number    021-W601**

**Part 2 - General Project Information**

<b>Project Type</b> <i>(Check that applies)</i>	Subdivision	<input type="checkbox"/>
	Site Plan / MSA	<input type="checkbox"/>
	Construction / Development	<input type="checkbox"/>
	<b>City's Capital Projects</b>	
	Engineering	<input type="checkbox"/>
	Environmental Services	<input type="checkbox"/>
	Operations	<input type="checkbox"/>
	Other Projects (Operations, Asset Management, Parks, etc.)	<input type="checkbox"/>
Project's Name		
Project's Address		
Applicant's / Developer's Name		
Amanda / Project Number		
Consulting Firm's Name		
Consulting Engineer's Name		
City's Staff Name		



**2.1 Description of separate sanitary sewer/nominally separate sanitary sewer (up to 1200 mm) / forcemain (upto 350 mm).**



## 2.2 Regulatory Requirements

1) Is the proposed work(s) exempted from the Environmental Bill of Rights (EBR) requirements?

YES  NO  N/A

*If 'YES', provide a rationale for exemption (e.g., provide the applicable regulation details):*

- This proposal is for an emergency situation.
- This proposal is for an amendment to or revocation of an existing ECA that is not environmentally significant.
- This proposal has been subject to or exempted from EAA requirements or considered in a decision of a tribunal.
- This proposal has been considered in a substantially equivalent process of public participation, and the public consultation was carried out under the Planning Act requirements.

2) Is the proposed work(s) subject to the requirements of the Environmental Assessment Act (EAA)?

YES  NO  N/A

*If 'YES', choose the applicable Municipal Class EA Schedule:*

Schedule A <b>EXEMPTED</b>	Schedule A+ <b>EXEMPTED</b>	Schedule B <input type="checkbox"/>	Schedule C <input type="checkbox"/>	Not Required <input type="checkbox"/>
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*If 'NO', provide a rationale for the exemption:*

Has the proposed undertaking fulfilled the requirements of the EAA through an exemption provided under:

Section  of Ontario Regulation No.

or

Declaration/Exemption Order No.

*If the Regulation, Declaration Order, or Exemption Order does not refer directly to this undertaking, provide supporting documentation to explain why it applies to this facility.*



## Attachment A - SS1 (Sanitary Sewer, Pre-Construction)

- 3) Does the project impact Indigenous treaty rights or asserted rights according to Schedule D, Section 3.11 of the CLI ECA?

YES  NO  N/A

*If 'YES', has consultation with Indigenous communities been completed?*

YES  NO  N/A

*If 'NO', please provide the rationale why:*

- 4) Has a Notice of Completion been submitted along with this application?

YES  NO  N/A

- 5) Were any Part II Orders (i.e., 'Bump-up' requests) received for this project?

YES  NO  N/A

*If 'YES', please provide details:*

- 6) Has an Environmental Study Report (ESR) been completed?

YES  NO  N/A

*If 'YES', please include the ESR Cover page with this submission.*

- 7) Does the Drainage Act apply for this work?

YES  NO  N/A

*If 'YES', please provide a copy of the Approval.*

- 8) Does the proposed work require a Permit from the Conservation Authority?

YES  NO  N/A

*If 'YES,' include a copy of the Permit.*

**The CLI-ECA cannot be processed until a copy of the Permit is received.**



# Attachment A - SS1 (Sanitary Sewer, Pre-Construction)

9) Are the proposed works a prescribed drinking water threat under the Clean Water Act (i.e., the establishment, operation, or maintenance of a system that collects, stores, transmits, treats, or disposes of sewage / sanitary sewers and related collection systems subcategory)?

YES  NO  N/A

10) Are proposed works located in an IPZ-1, WHPA-A, or WHPA-B vulnerable area with a vulnerability score of 10 defined in the Toronto and Region source protection plan under the Clean Water Act<sup>1</sup>?

YES  NO  N/A

11) Is the conveyance capacity of the proposed works over 10,000 cubic metres of sewage per day<sup>2</sup>?

YES  NO  N/A

*If 'YES' to 9, 10, and 11, the proposed works are a significant drinking water threat. Please provide details of the MECP Source Protection Standard Operating Policies<sup>3</sup> to mitigate significant risks:*

<sup>1</sup> Note: As of March 2025, the City of Markham does not have any IPZ-1, WHPA-A, or WHPA-B areas, including any with a vulnerability score of 10.

<sup>2</sup> Threshold for significant threat is per MECP's Threats and Circumstances Table (2017\_2018\_chemical\_and\_pathogen\_tables\_of\_threats\_12\_v2.xlsx - <https://www.ontario.ca/page/tables-drinking-water-threats>).

<sup>3</sup> Design Criteria for Sanitary Sewers, Storm Sewers and Forcemains for Alterations Authorized under an Environmental Compliance Approval Ministry of Environment, Conservation and Parks v.2.0, May 31, 2023, Appendix II.





### 3.0 Design Certification By Licensed Engineering Practitioner

- 1) I certify that the design complies with the requirements set in the Corporation of the City of Markham's Environmental Compliance Approval (ECA) for the Markham Wastewater Collection system, ECA Number 021-W601, including but not limited to Schedule D, S. 6.0 as amended from time to time.
- 2) I certify that the design of the sanitary sewer satisfies the criteria set out in the Ministry's publication titled "Design Criteria for Sanitary Sewers, Storm Sewers and Forcemains" dated May 2023, as amended from time to time.
- 3) I certify that the design is consistent with the current City's Design Criteria and Standard Drawings, as amended from time to time.
- 4) I certify that no gravity sanitary sewers exceed 1200 mm in diameter and no forcemain sanitary sewers exceed 350 mm in diameter.
- 5) I also certify that any deviations due to site conditions or constraints, as identified in (1) to (4) above, have been discussed, reviewed, and accepted by the City. I further certify that approval for any works that do not meet the minimum requirements in the CLI ECA will be requested through the Ministry (i.e., Schedule C Notice<sup>1</sup>).
- 6) I hereby further verify the following:
  - a) The maximum wastewater discharge by users who will be serviced by the addition, modification, replacement, or extension of the separate sewer/nominally separate sewer/forcemain will not result in:
    - An exceedance of the municipal sewage collection system hydraulic capacity, sewage treatment plant uncommitted reserve hydraulic capacity, or the downstream pumping station capacity;
    - Adverse effects;
    - Any increase in collection system overflows that is not offset by measures, and have documented any offset measures used.
    - Any increase in the frequency and/or volume of Sewage Treatment Plant (STP) bypasses or STP overflows that is not offset by measures, and have documented any offset measures used. (Alternatively, if the wastewater flows to a STP not owned by the Owner, then the wastewater volume or flow rate is as agreed to with the Owner of the STP).

<sup>1</sup> Any Schedule C submission will require a separate type of checklist, since they do not feed into SW1 forms and do not necessarily meet CLI ECA requirement. The City may have many similar documentation requirements as these preauthorized works but we will have to track and report on those separately.



## Attachment A - SS1 (Sanitary Sewer, Pre-Construction)

- b) The separate sewer, nominally separate sewer, or forcemain alteration will:
- Not cause overflows or backups, nor increase surcharging at any maintenance holes or privately owned infrastructure (e.g., basements) within the municipal sewage collection system or any municipal sewage collection system connected to it; and
  - Provide smooth flow transition to existing gravity sewers.
- c) An assessment of the proposed works has been completed to determine if the works pose a significant drinking water threat. The proposed works (Separate Sewers, Nominally Separate Sewers or Forcemains) are not significant threats to sources of drinking water or the design includes features that mitigate risk, such as those included in the Ministry's Standard Operating Policy for Sewage Works, as amended from time to time; and Source Protection Plan policies pertaining to the works;
- d) The separate sewer/nominally separate sewer/forcemain alteration is wholly located within the municipal boundary over which the Owner has jurisdiction except where there is an agreement existed between municipalities;
- e) The Owner consents to the separate sewer/nominally separate sewer/forcemain alteration; and
- f) I am an authorized representative of the Applicant / Developer to complete this verification.

Name of Licensed Engineering Practitioner (First and Last name)	Company Name & Address
Signature	Date (mm/dd/yyyy)

Name of Licensed Engineering Practitioner (Sub-consultant, if applicable) (First and Last name)	Company Name & Address
Signature	Date (mm/dd/yyyy)



**4.0 Statement of Applicant / Developer**

I hereby declare that, to the best of my knowledge, the information contained herein, and the information submitted in support of this application is complete and accurate for the purpose of obtaining the Sanitary Sewer (SS1) Approval for Future Alteration Authorized for Separate Sewers/Nominally Separate Sewers/Force mains under **021-W601**.

Name (First and Last name)	Title
Signature	Date (mm/dd/yyyy)

**5.0 Documents to be Submitted by the Consulting Engineer**

- 1) This Attachment A, duly signed and dated by the Consulting Engineer and the Applicant / Developer.
- 2) Proof of legal name (*Articles of Incorporation or other applicable documents if the Applicant / Developer is a Corporation; or birth certificate or passport if the Applicant / Developer is a person*).
- 3) If applicable, Permit / Approval from the local Conservation Authority and/or MNRF.
- 4) If applicable, a Proof of Consent letter from the landowner is to be provided if the works are to be constructed on lands not owned by the Applicant / Developer.



**6.0 Review by the City of Markham Department**

The above information (including all Technical Reports and Engineering Drawings) has been reviewed and/or peer-reviewed by the appropriate City's Department and meets the City's requirements. Acceptance of this project is in reliance on the professional skill and judgement of the Licensed Engineering Practitioner certified in Section 3.0.

Name of the City's Reviewing Department	
Development Engineering	<input type="checkbox"/>
Environmental Engineering	<input type="checkbox"/>
Capital Engineering	<input type="checkbox"/>
Environmental Services	<input type="checkbox"/>
Operations	<input type="checkbox"/>
Others	<input type="checkbox"/>
Name of Review Staff (First and Last name)	Title
Signature	Date (mm/dd/yyyy)