

# ONTARIO REGULATION 267/03 - REQUEST FOR AMENDMENT TO AN APPROVED NUTRIENT MANAGEMENT STRATEGY

Please complete the following information to determine if the changes are acceptable to be processed as an amendment to the approved NMS or if a new NMS is required to be prepared and approved.

## NUTRIENT MANAGEMENT STRATEGY INFORMATION

Operation ID: \_\_\_\_\_

Approval Date: \_\_\_\_\_

Owner/Operator Name: \_\_\_\_\_

Certified Preparer Name: \_\_\_\_\_

Has a building permit been applied for based on the original approval and/or will a new building permit be required to complete the changes planned in the amendment?

Yes       No

If "Yes" a new NMS will be required to be submitted and approved

## AMENDMENT INFORMATION

Please summarize the changes that are proposed

*Example: The barn location has moved 100m North further from the road*

Please provide the reason the amendment is needed to the approved NMS

*Example: Change in the barn location is required to meet Minimum Distance Separation Requirements*

**INFORMATION SUBMITTED FOR AMENDMENT**

Please submit a complete NMS including all sections

SECTION OF THE APPROVED NMS	HAS CHANGED SINCE THE ORIGINAL APPROVAL	
AgriSuite Printout	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Overview of the Operation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Farmstead Sketch	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Engineering Requirement Form or Engineer’s Commitment Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**SUMMARY OF THE CHANGES SUBMITTED**

INFORMATION IN THE APPROVED NMS	HAS CHANGED SINCE THE ORIGINAL APPROVAL	
Farm Unit Properties <i>Addition or subtraction of properties or changes to property information</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Transfer Properties <i>Addition or subtraction of properties or changes to property information</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Location of livestock housing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dimensions of livestock housing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Addition or removal of livestock housing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Location of manure storage(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dimensions of manure storage(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Addition or removal of manure storage(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Livestock numbers or type	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**SIGNATURES**

Amendments are changes to a Nutrient Management Strategy after an approval has been issued. Updated signoff by the “Owner” or “Operator” is required to verify understanding of the changes and impacts to the approval. It is required that the “Owner” or “Operator” signs the updated *Farm Unit Declaration Form & Signoff Form from AgriSuite*.

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NMS Preparer Signature Date (yyyy/mm/dd)

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Owner/Operator Signature Date (yyyy/mm/dd)