

Project Prescreening Form

For Office Use
Only

Received By:

Date:

Approved

Reviewed By:

Date:

Rejected

Applicant Legal Name (Company Name):

Mailing Address:

Tel No.:

Fax No.:

Cell No.:

Website Address:

Contact Name:

Title:

Tel No.:

Fax No.:

Cell No.:

Email Address:

Legal Structure of Company:

Year Established:

Joint Venture:

Corporation:

Partnership:

Sole Proprietor:

Other:

Names and Titles of Officers, Partners, Principal:

Name:

Title:

Location of Proposed Development:

Proposed Land Use(s) and Brief Project Description (please attach description if more space is required):

Project Logistics:	
Estimated cost of construction:	
Proposed Start Date:	
Proposed Completion Date:	

Prescreening Checklist				
ITEM	INFORMATION REQUIRED Please attach descriptions if more space is required.	SUBMITTED (✓) or NOT APPLICABLE (NA)		COMMENTS
Use and Operation of Proposed Site		Yes	No	
a	Will the site include aircraft storage?			
b	Will the site include maintenance or refurbishing of aircraft?			
If Yes, please outline the type of storage and/or maintenance that will occur at the Site:				
c	Will the Site encompass painting &/or stripping of paint from aircraft?			
* If yes, please indicate what measures will be taken to ensure compliance with all regulations pertaining to the safe use of the facility.				
d	Will de-icing or anti icing of aircraft occur at the Site?			
If yes, describe what type of de-icer will be stored and used at the Site.				
e	Will maintenance of equipment occur at the Site?			
If yes, please indicate what type of equipment will be housed at the Site and what type of maintenance will occur:				

Prescreening Checklist				
ITEM	INFORMATION REQUIRED Please attach descriptions if more space is required.	SUBMITTED (✓) or NOT APPLICABLE (NA)		COMMENTS
f	Will hazardous materials be used at the Site?			
g	Will hazardous materials be stored at the Site?			
h	Will hazardous by-product(s) be produced as a result of use of hazardous materials at the Site?			
If yes to any of the above, please indicate what type and quantity of hazardous materials will be used, what type of storage tank will be used and whether the storage tanks are proposed to be aboveground (underground tanks are not permitted) and what type of hazardous by-product(s) will be produced at the Site:				
i	Will fuel be used &/or stored at the Site?			
* If yes, please describe facility and indicate what type and quantity of fuel to be used &/or stored at the Site:				
j	Will the Site house a wash bay(s)?			
If yes, please indicate what the wash bay(s) will be used for on Site (i.e. equipment, vehicles, etc.)				
k	Will sewage hook-up be required at the Site?			
If yes, please indicate whether other substances besides domestic waste will be discharged into the sanitary sewer: If no, please explain how sanitary will be handled:				
l	Will waste generation occur at the site?			
If yes, please indicate the type of waste:				
m	Will Halocarbons be used at the Site?			
If yes, please indicate what type and quantity of halocarbon will be used at the Site:				
n	Are there any other operations proposed for the Site that have not been identified above?			

Prescreening Checklist			
ITEM	INFORMATION REQUIRED Please attach descriptions if more space is required.	SUBMITTED (✓) or NOT APPLICABLE (NA)	COMMENTS
If yes, please indicate operations:			
APPLICATION CERTIFICATION:			
"I certify that the information given in this <i>Project Prescreening Form</i> is true to the best of my knowledge and belief."			
_____ _____ Signature		Print Name	
_____ _____ Title		Date	