

## **Statement of Completion Transit Projects**

For Office Use Only				
Reference Number	Initials	Date (yyyy/mm/dd)		

## **General Information and Instructions**

## General

The information provided on this form is collected under the authority of the Ministry of the Environment, Conservation and Parks Transit Project Assessment Process as prescribed under Ontario Regulation 231/08 of the Environmental Assessment Act.

## Instructions

- 1. Questions regarding the completion and submission of this form should be directed to the Client Services and Permissions Branch at 416-314-8001 or 1-800-461-6290.
- 2. Please send the completed form to:

Ministry of the Environment, Conservation and Parks Director, Environmental Assessment Branch

135 St. Clair Avenue West, 1st Floor

Toronto ON M4V 1P5 Fax: 416-314-8452

<ol><li>If additional spa</li></ol>	ace is needed, pleas	se attach a separate	sheet.			
4. Please print or	type all information	clearly.				
Proponent Info	ormation					
Proponent Name (	legal name of indivi	dual or organization)	)			
Ontario Northlan	d Transportation (	Commission				
Contact Person						
Last Name Perepeluk				et Name estal	Middle Initial	
Telephone Numbe 705-471-6813	ext.	ax Number		Email Address Krystal.Perepeluk@ontarionorthland.ca		
Proponent Type	)					
☐ Municipal ☐ Other (describe	✓ Provincial	Crown	n Corporatio	on	Private S	Sector
Co-proponent	Information					
Check here if m	ore than one propor	nent				
Name(s) of Co-pro	ponent(s)					
Attach complete	ed and signed A	dditional Propone	ent Inform	ation form for eac	n co-proponent.	
Description File name						
Attach File(s)	Remove File(s)	View File(s)				
Proponent Ma	iling Address					
Civic Address						
Unit Number	Street Number 555	Street Name Oak Street Eas	t			РО Вох

Delivery Designator						
Rural Route Suburban Se	ervice Mobile Route	General Delive	ery 🔽 N/A			
Delivery Identifier						
Municipality/Unorganized Township   Pro	ovince	Country		Postal Code		
, , ,	ntario	Canada		P1B 8L3		
Project Information						
Project Name						
Northlander Passenger Rail Service -	- Timmins-Porcupine Station					
If project is a building, complete A. If proj		3.				
A. Building						
Site Address – Street information (applies to an address that has civic numbering and street information includes street number, name, type and direction)  Unit Identifier (identifies type of unit, such as suite & number)						
Non Address Information (includes any a	additional information to clarify cli	ent's physical site	location)			
PIN: 653860216, located adjacent to	<del>_</del>		•	N 1C0. Falcon		
Street abuts the site to the north and						
B. Linear Facility						
Brief Project Description						
Date Notice of Commencement	Date Notice of Completion of E	nvironmental	Date Minister's Not	ice diven		
distributed (yyyy/mm/dd) (date of first	Project Report given (yyyy/mm/		(yyyy/mm/dd)	ioc given		
publication)	publication)					
2024/05/30	2025/04/03	2025/04/03				
Were any conditions imposed by the Mini	ister?					
☐ Yes ☑ No						
Were any notices to suspend the 120-da	 y period given?					
✓ Yes	,,					
If yes, provide number of days project timelines were suspended						
189						
Were any objections submitted to the Minister?						
☐ Yes ✓ No						
Was a Revised Environmental Project Re	eport prepared?					
☐ Yes ☑ No						
If yes, enter the date below						
Date Revised Environmental Project Report submitted (yyyy/mm/dd)  Date Minister's Notice given (yyyy/mm/dd)						
Location of Public Available Documentation						
Same as Site Address						
Proponents are required to retain, either	on site or in another location wh	ere they will be re	adily available, any	publicly available		

pre-planning reports/information; Environmental Project Report; Revised Environmental Project Report; Addendum to Environmental Project Report; and all given or received notices and Statements of Completion prepared under the Transit Project Assessment Process, as well as documentation of any commitments made by the proponent to address concerns in any of the above-noted reports.

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✓ Civic Address Unit Number	Street Number 555	Street Name Oak Street East				РО Вох		
Municipality/Unorg	anized Township	Province Country				Postal Code		
North Bay		Ontario		Canad	Canada		P1B 8L3	
Survey Addres	ss							
Geo Reference (	Non Address Ir	nformation)						
Description	Map Datum	Zone	Accuracy Estimate		Referencing Method	UTM Easting	UTM Northing	
Southwest corner of property								
Physical location of front door								
Contact Informa	ation about proj	ect documentati	ion				•	
Contact Person								
Last Name Perepeluk			Firs Kry	t Name stal			Middle Initial	
Telephone Numbe 705-471-6813	r ext.					containing project documentation www.ontarionorthland.ca/en/northla		
Statement of F	Proponent							
I, the undersigned hereby declare that, to the best of my knowledge, the information contained in this Statement is complete and accurate and I have complied with the Transit Project Assessment Process requirements set out in Ontario Regulation 231/08 under the Environmental Assessment Act.								
I, the undersigned, intend to proceed with the above-noted project in accordance with the: (check only one)  I Environmental Project Report								
Environmental Project Report, subject to the conditions set out in a Minister's Notice								
Revised Environmental Project Report								
I have the authority to bind the proponent.								
✓ By checking th	nis each of the und						below in electronic	
Name						Title		
Krystal Perepeluk				Director	Director			
Signature					Date (yyyy/mm/dd) 2025/05/16			

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Save Form

**Print Form** 

Clear Form