City of Markham - Components of the Sanitary Sewage System (Sewage Pumping Station no greater than 250 L/s)

(to be reviewed in conjunction with MECP Form SS2 and Approval 021-W601)

Part 1 - Environmental Compliance Approval Number: 021-W601

Part 2 - General Project Information

Project Type (Check that applies)	Subdivision	☐
	Site Plan / MSA	☐
	Construction / Development	☐
	City's Capital Projects	
	Engineering	☐
	Environmental Services	☐
	Operations	☐
	Other City Departments (Asset Management, Parks, etc.)	☐
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 Sanitary System Component to be Altered
(Use attachments if required)

Complete for Sewage Pumping Station Only

Asset ID and Name	
Site Location	
Latitude and Longitude	
Coordinates (optional)	
Description	
Pumping Station Capacity	
Equipment	
Emergency Storage	
Equipment: Associated controls and Appurtenances	
Sewage Pumping Station – Collection System Overflow	
Receiving Stations (if applicable)	
Odour Control Units	
Standby Power	
Notes	

2.2 Regulatory Requirements

1) Is the proposed work(s) exempt 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 applicable Municipal Class EA Schedule:

Schedule A **EXEMPTED**	Schedule A+ **EXEMPTED**	Schedule B ☐	Schedule C ☐	Not Required ☐

If 'NO', provide a rationale for the exemption:

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

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 to this work?

YES ☐	NO ☐	N/A ☐

If 'YES', provide approval.

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

YES ☐	NO ☐	N/A ☐

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

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

9) Are there any other consultation/notification activities that have been undertaken to fulfil requirements by other legislation (e.g., MNRF, DFO, etc.) or through voluntary efforts?

YES ☐	NO ☐	N/A ☐

If 'YES', provide documents describing each of these consultation/notification activities.

10) 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 ☐

11) Based on components and their classification as a prescribed threat/threats (if any) and a review of the current source protection plan and current MECP threats and circumstance tables, are any of the components a significant threat[1]?

YES ☐	NO ☐	N/A ☐

[1] Approved Source Protection Plan: CTC Source Protection Region v.7.0, October 15, 2025.

If 'YES', review the drainage area size and predominant land use type for the applicable vulnerable area type and score to determine if the activity is a significant drinking water threat[2]. Are the works a significant threat?

If 'YES', please provide details of the MECP Source Protection Standard Operating Policies[3] to mitigate significant risks:

Please provide MECP circumstances details and MECP-defined Chemical Risk and/or pathogen risk to document the risk assessment completed for the proposed components:

2.3 Technical Submissions

1) Engineering Reports

Name of the Report	Prepared by (Consulting firm)	Date (mm/dd/yyyy)	City Stamped (mm/dd/yyyy)

2) Engineering Drawings
(Sanitary Components - related drawings)

Name and number of Engineering Drawings	Prepared by (Consulting firm)	Date (mm/dd/yyyy)	City Stamped (mm/dd/yyyy)

[2] Thresholds for significant threats are 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).

[3] 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 Municipal Sewage Collection System, ECA Number 021-W601, including but not limited to Schedule D, S. 6.0, as amended from time to time; and adding new Sewage Pumping Stations, where they:

   a) Are designed to transmit a related capacity of no greater than 250 L/s:

   b) Include emergency stand-by power, Spill containment, and emergency alarms (SCADA, if applicable);

   c) Include emergency storage designed to provide at a minimum two (2) hours of response time at peak design flow;

   d) Include odor and corrosion control, as applicable;

   e) Would serve a new residential development (or new phased residential development), which may include existing residential development that has no Combined or Partially Separated Sewers;

   f) Are designed to only collect sanitary Sewage and not Stormwater; and

   g) Do not include an emergency sanitary overflow or piping to a municipal Stormwater management system or a natural receiver to prevent the discharge to the Natural Environment.

2) I certify that the design of the Components of the Sanitary Sewage System 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 of the Components of the Sanitary Sewage System satisfies the criteria set out in the Ontario Design Guidelines for Sewage Works.

4) I certify that the design of the Components of the Sanitary Sewage System satisfies the requirements of the latest City's Sewage Pumping Station Design Standard and the City's SCADA Design Standard.

5) I certify that the design is consistent with the current City's Design Criteria and Standard Drawings, as amended from time to time.

6) I hereby further verify the following:

1) The alteration of the municipal sewage collection system shall not result in:

a) Exceedance of hydraulic capacity (including uncommitted reserve hydraulic capacity, as applicable) of the downstream:

i) Municipal sewage collection system; or

ii) Receiving sewage treatment plants (STP).

b) Exceedance of any downstream pumping station capacity as specified in Schedule B under 021-W601, unless verified under Part 3 of the MECP Form SS2 form;

c) An increase in the capacity of an existing Pumping Station Capacity of greater than 30%.

d) Any increase in collection system overflows, that is not offset by measures taken elsewhere in the municipal sewage collection system, and have documented any offset measures used;

e) Any increase in the frequency and/or volume of 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);

f) Deterioration of the normal operation of municipal STPs (as applicable) and/or municipal sewage collection system;

g) A negative impact on the ability to undertake monitoring necessary for the operation of the municipal sewage collection system; and

h) Adverse effects.

2) The alteration will:

a) 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 collection system connected to it; and

b) Provide smooth flow transition to existing gravity sewers.

c) Not increase the generation of sulfides and other odourous compounds in the municipal sewage collection system.

3) An assessment of the proposed works has been completed to determine if the works pose a significant drinking water threat. The proposed works do not pose any threats to sources of drinking water or design includes features that mitigate the threat to sources of drinking water, such as those included in: Ministry's Standard Operating Policy for Sewage Works, as amended from time to time; and Source Protection Plan policies pertaining to the works.

4) The alteration is wholly located within the municipal boundary over which the owner has jurisdiction, except where there is an agreement existed between municipalities;

5) 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 Sewage (SS2) Approval for Future Alteration Authorized for Components of the Municipal Sewage Collection System 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	☐
Environmental Engineering	☐
Capital Engineering	☐
Environmental Services	☐
Operations Others	☐ ☐
Name of Review Staff (First and Last name)	Title
Signature	Date (mm/dd/yyyy)