

FORM A

APPLICATION FOR A PERMIT TO ALTER MANGROVES

Forests (Protection of Mangroves) Regulations (1989)

For Official Use Only		
Date Received	Completeness Date	Deadline

Thank you for collecting this form. Please fill it in carefully with details of your proposed development and the mangroves that could be affected. When complete, send or hand in the form to the Forest Department together with proof of payment of your application fee. This application fee covers the cost of analyzing your inquiry. Your application will be considered as quickly as possible, so please ensure that all the questions are fully answered. Gaps and inaccuracies will cause delay.

Permission to clear mangroves is not automatically given by the department. The decision will depend on the type of development proposed, its location, size, environmental, social and economic impacts. Failure to apply for a permit will result in the prosecution under the Forests (Protection of Mangroves) Regulations (1989) (as amended).

1. Details of Applicant:

Name:

Address:

.....

Telephone Number (Day): (Night):

Fax Number:

2. Details of Applicants' Agent (If Applicable):

Name:

Address:

.....

Telephone Number (Day): (Night):

Fax Number:

3. Location of Property:

District: Town/Village:

Description of the exact location (for example – mileage on the Western Highway, between the road and the sea.) Be as precise as you can:
.....
.....

4. Names and addresses of adjoining property owners (where known)

i ii;
.....
.....

iii iv
.....
.....

5. What is the acreage of mangrove you are applying to clear? acres.

6. What type of mangrove would be cleared by the proposed development? (please tick)

Red Mangrove Black mangrove White Mangrove Buttonwood

7. What type of setting is the mangrove growing in? (please tick)

Overwash Fringing Riverine Basin Savannah

8. How high is the mangrove? (If it is all roughly the same, give the height in feet; if there is mangrove of different heights; give the range from the shortest to tallest).

All the mangrove is roughly feet high.

The mangrove ranges from roughly to feet high.

9. How do you propose to clear the mangrove?

10. Will the area be filled? Yes No With What Material?

11. Who will carry out the work?

12. Approximately when will alteration start (month and year)
and finish (month and year).....

13. What type of development are you proposing (for example, house lots, a marina, tourist facility, machinery storage area, etc.)
.....
.....

14. Is dredging likely to be involved? Yes No

If it is, you need to contact the Office of Geology and Petroleum in Belmopan to apply for a license (Tel: 822-2178/2651 Fax: 822-3538).

15. Have you looked at alternative sites for development? Yes No

If not, please explain why:
.....
.....

16. Does this development need access to waterways? Yes No

If yes, please explain why:
.....
.....

17. Please provide a copy of the lease, fiat or title.

18. Please attach a sketch, photocopy, plan or map of the land, marking on it: -
- i. The part of the property that is mangrove;
 - ii. What is on the rest of the property (eg. High bush, farm, etc.);
 - iii. All roads or tracks;
 - iv. All rivers, creeks, lagoons and coastline;
 - v. The boundary of the property and its size in acres or hectares;
 - vi. The dimensions of the property in feet or meters
 - vii. The proposed alteration and development;
 - viii. Adjacent land holders;
 - ix. Any other information that you feel would be helpful for the Department to consider.

19. Will you, or have you completed and Environmental Impact Assessment for your project?

Yes

No

20. If you are sub-dividing the property, are you applying or have you applied the Land Utilization Authority, Ministry of Natural Resources for provisional (or final) approval?

21. Are you applying, or have you applied for Fiscal Incentive from the Ministry of Economic Development?

22. The Prescribed fee of \$..... has been deposited in the Treasury.

Receipt number Dated

I do hereby declare that the details given above are true to the best of my knowledge and belief.

Signature:

Witness Signature:

Date:

Date:

Please return the completed form to the Mangrove Manager, Forest Drive, Belmopan, or to your nearest Forest Office.