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# Conservation Proposal Form

## Voluntary Conservation Covenant or Land Donation

OFFICE USE ONLY

File No: \_\_\_\_\_

(Please Check ✓ One Item to the right)

**Voluntary Conservation Covenant**

**Voluntary Land Donation**

### SECTION 1: OWNER INFORMATION

(ADD ADDITIONAL PAGE IF MORE THAN TWO OWNERS)

(1) _____		(2) _____	
Name		Name	
(1) _____		(2) _____	
Street Address		Street Address	
_____	_____	_____	_____
Town/Prov.	Postal Code	Town/Prov.	Postal Code
_____	_____	_____	_____
Telephone	Fax	Telephone	Fax
_____	_____	_____	_____
Email		Email	

### SECTION 2: APPLICANT INFORMATION

(IF DIFFERENT FROM OWNER)

_____	_____	_____
Name	Street Address	Town/Prov.
_____	_____	_____
Postal Code	Telephone	Fax
_____	_____	_____
Email		_____

### SECTION 3: DESCRIPTION OF PROPERTY

(AS INDICATED ON STATE OF TITLE CERTIFICATE)

Lot/Parcel \_\_\_\_\_ Plan \_\_\_\_\_ Block \_\_\_\_\_ District Lot/Section \_\_\_\_\_

Range \_\_\_\_\_ Other Description \_\_\_\_\_

Street Address or General Location \_\_\_\_\_

Jurisdiction and Folio Number \_\_\_\_\_ (From Property Assessment/Tax Notice)

Parcel Identifier (PID) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (From State of Title Certificate)

Proposed Covenant or Land Donation Size \_\_\_\_\_ hectares

**SECTION 4:** Please provide one (1) full-scale, and three (3) reduced (11 x 17) copies of a detailed site plan (drawn to scale).

**SECTION 5:** Why do you want to covenant or donate your land? (e.g., to protect certain feature(s) on-site, to ensure land is not subdivided in the future, to maintain the general character of the site or area, provide for specific use, to buffer an existing protected area, etc.)

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**SECTION 6:** Please provide a description of special features on the property (e.g., plants, trees, animals, birds, geology, views, lakes, wetlands, etc.). Maps, sketches, photos, studies or reports can be attached to this proposal to further illustrate these features.

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**SECTION 7:** Please provide a description or a sketch map of any improvements on the land (buildings, structures, docks, trails, roads, driveways, etc.).

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**SECTION 8:** Please provide a description of any water licenses, tenancies or other agreements (e.g., other covenants, rights of way, etc.).

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**SECTION 9:** Please provide a description of lands surrounding the property and their use (e.g., undeveloped, residential park, commercial, etc.).

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**SECTION 10:** Is this property or a portion of the property in the Agricultural Land Reserve or Forest Land Reserve?

AGRICULTURAL LAND RESERVE	NO	<input type="checkbox"/>	YES	<input type="checkbox"/>	If yes, size of area: _____ hectares
FOREST LAND RESERVE	NO	<input type="checkbox"/>	YES	<input type="checkbox"/>	If yes, size of area: _____ hectares

**SECTION 11: If this is a covenant proposal, do you wish to have this covenant co-held with another organization/conservancy?** Note that such an organization/conservancy must be authorized to accept covenants under Section 219 of the *Land Title Act* and authorized to accept a statutory right of way under Section 218 of the *Land Title Act*.

NO  YES

\_\_\_\_\_  
Name of the Organization/Conservancy

**SECTION 12: WAIVER OF CONFIDENTIALITY**

All proposals and negotiations that the Trust Fund Board receives for voluntary covenants and land donations are considered confidential and are reviewed at in camera meetings. **If you wish to waive this confidentiality, please indicate below.** Please note that once your covenant or donation is registered on title, it is no longer confidential.

By signing below, I waive my confidentiality:

(1) \_\_\_\_\_  
**Consent and Authorization Signature**

(2) \_\_\_\_\_  
**Consent and Authorization Signature**

(1) \_\_\_\_\_  
**Date**

(2) \_\_\_\_\_  
**Date**

**SECTION 13: OWNER/APPLICANT CONSENT AND AUTHORIZATION**

(Signature of all registered owners is required. For additional owners, including Strata Corporations, attach a separate sheet)

In order to assist the Islands Trust Fund in the review and evaluation of my conservation proposal, by signing below, I authorize an Island Trust Fund Representative to enter onto the land at reasonable times, after making reasonable efforts to arrange to schedule a convenient time for such a visit, to inspect the land. I acknowledge a right, if a convenient time can be scheduled, to accompany the Island Trust Fund Representative on the site visit.

By signing below, I authorize the Applicant named in Section 3 of this application to represent this application:

(1) \_\_\_\_\_  
**Consent and Authorization Signature**

(2) \_\_\_\_\_  
**Consent and Authorization Signature**

(1) \_\_\_\_\_  
**Date**

(2) \_\_\_\_\_  
**Date**

**NEXT STEPS:**

After a site visit is complete, the Trust Fund Board will review your proposal as well as a staff report. A decision about your conservation proposal will be made at the next Trust Fund Board meeting.

Freedom of Information and Protection of Privacy

Personal information contained on this form is collected under the *Local Government Act* for the purpose of responding to this application, or for purposes directly connected with this application. Information on your application form is available to the public upon request under freedom of information legislation. Please contact a Deputy Secretary if you have any questions regarding the collection of personal information on this form. Telephone numbers and addresses are on the front of this application form.