



**PERMIT FOR LOW-IMPACT RECREATIONAL USE OF  
MARGINAL MUNICIPAL LAND**

Contact: [sg.info@sourismanitoba.com](mailto:sg.info@sourismanitoba.com)

Permit Number: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**1. Permit Holder Information**

Name: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**2. Description of Intended Use**

**3. Location of Land**

Parcel ID or Legal Description: \_\_\_\_\_

General Location/Address (if applicable): \_\_\_\_\_

**4. Duration of Use**

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

**5. Maintenance Plan**

**6. Terms and Conditions**

- No Permanent Alterations: No permanent structures, grading, or modifications are allowed.
- Maintenance: The permit holder is responsible for keeping the land clean, safe, and free of hazards.
- Environmental Protection: Activities must not disturb wildlife, vegetation, or watercourses. Any discovery of archaeological or culturally significant materials must be reported immediately.
- Municipal Access: The municipality retains the right to access the land at any time without prior notice.
- Revocation: This permit may be revoked at any time, for any reason, without compensation. Upon revocation, the permit holder must restore the land to its original condition within 30 days or as otherwise directed.
- Insurance: Insurance requirements will be determined on a case-by-case basis depending on the intended use.
- Signage: No signage may be installed without prior written approval.
- Liability: The permit holder assumes all risks and liabilities associated with the use of the land. The municipality is not liable for any injury, loss, or damage.

**7. Acknowledgment and Agreement**

I, the undersigned, have read and understood the terms and conditions of this permit and the associated municipal policy. I agree to comply with all requirements and understand that failure to do so may result in revocation and other consequences.

Permit Holder Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Municipal Representative Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_