Notice of Alteration Form

Dangerous Goods Handling and Transportation Act Licence



Client File No. :	DGH&	TA Licence No. :
Legal name of the Licencee:	•	
Name of the FACILITY:		
Type of Activity:		
Licencee Contact Person: Mailing address of the Licencee: City: Phone Number: Name of proponent contact person	Provinc Fax: for purposes of t	ce: Postal Code: Email: the environmental assessment (e.g. consultant):
Phone: Fax:	Mailing	gaddress:
Email address:		
Date:	Signature:	
	Printed name:	
A complete Notice of Alteration (NoA) consists of the following components: Cover letter Notice of Alteration Form 1 electronic copy of the reports/ plans supporting the alteration to the facility		Submit the complete NoA to: Director Environmental Approvals Branch Manitoba Environment and Climate Change 14 Fultz Blvd. Winnipeg, Manitoba R3Y 0L6 EABDirector@gov.mb.ca For more information: Toll-Free: 1-800-282-8069 Phone: (204) 945-8321 Fax: (204) 945-5229 https://www.gov.mb.ca/sd/ permits_licenses_approvals/eal/licence/index.html