## U.S. Army Corps of Engineers (USACE)

## APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT

33 CFR 325. The proponent agency is CECW-CO-R.

Form Approved -OMB No. 0710-0003 Expires: 01-08-2018

The public reporting burden for this collection of information, OMB Control Number 0710-0003, is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at <a href="whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil">whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil</a>. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR APPLICATION TO THE ABOVE EMAIL.

## PRIVACY ACT STATEMENT

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned. System of Record Notice (SORN). The information received is entered into our permit tracking database and a SORN has been completed (SORN #A1145b) and may be accessed at the following website: <a href="http://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx">http://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx</a>

	(ITEMS 1 THRU 4 TO BE	FILLED BY TH	E CORPS)					
1. APPLICATION NO.	2. FIELD OFFICE CODE		3. DATE RECEIVED	4. DATE APPLIC	ATION COMPLETE			
	(ITEMS BELOW TO BE	FILLED BY AP	PLICANT)					
5. APPLICANT'S NAME 8. AUTI		8. AUTHORIZ	HORIZED AGENT'S NAME AND TITLE (agent is not required)					
First - Middle -	Last -	First -	Middle - Last -					
Company -		Company -						
E-mail Address -		E-mail Address	S -					
6. APPLICANT'S ADDRESS:			9. AGENT'S ADDRESS:					
Address-		Address-						
City - State -	Zip - Country -	City -	State -	Zip -	Country -			
7. APPLICANT'S PHONE NOs. w/AREA CODE 1		10. AGENTS PHONE NOs. w/AREA CODE						
a. Residence b. Business	c. Fax	a. Residence	b. Business	s c. F	Fax			
I hereby authorize,TRC Companies, supplemental information in support of this	permit application.	my agent in the	processing of this applic	ation and to furnish	n, upon request,			
SIGNATURE OF APPLICANT DATE  NAME, LOCATION, AND DESCRIPTION OF PROJECT OR ACTIVITY								
12. PROJECT NAME OR TITLE (see instruction	· · · · · · · · · · · · · · · · · · ·	TION OF TRO	OLOT OK ACTIVITY					
13. NAME OF WATERBODY, IF KNOWN (if applicable)		14. PROJECT STREET ADDRESS (if applicable)						
		Address						
15. LOCATION OF PROJECT			_					
Latitude: ∘N Longit	ude: ∘W	City -	SI	tate-	Zip-			
16. OTHER LOCATION DESCRIPTIONS, IF K	NOWN (see instructions)							
State Tax Parcel ID	Municipality							
Section Township		Panas						

I			
18. Nature of Activity (Description of pro	in at in all de all factures)		
16. Nature of Activity (Description of pro	gect, include all leatures)		
10. Project Burness (Describe the reason	on or purpose of the project, see instructions)		
19. Project Pulpose (Describe the reast	of or purpose of the project, see instructions)		
USE	BLOCKS 20-23 IF DREDGED AND/OR FILL MATE	RIAL IS TO BE DISCHARGED	
20 Pageon(s) for Discharge			
20. Reason(s) for Discharge			
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21. Type(s) of Material Being Discharge	Туре	Туре	
21. Type(s) of Material Being Discharge		Type Amount in Cubic Yards	
21. Type(s) of Material Being Discharge	Туре	Type Amount in Cubic Yards	
21. Type(s) of Material Being Discharge Type Amount in Cubic Yards	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
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<ul> <li>21. Type(s) of Material Being Discharge</li> <li>Type Amount in Cubic Yards</li> <li>22. Surface Area in Acres of Wetlands of Acres</li> </ul>	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
21. Type(s) of Material Being Discharge Type Amount in Cubic Yards  22. Surface Area in Acres of Wetlands of Acres or	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
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24. Is Any Portion of the	e Work Already Complete?	Yes No IF YES, D	ESCRIBE THE COMPLE	ETED WORK	
25 Addresses of Adjoin	ning Property Owners, Lessee	s Etc. Whose Property Ad	lioins the Waterbody (if mo	re than can be entered here inlease at	tach a sunnlamental list\
	imig i ropolty o milolo, 20000	o, 2.6., ***********************************	joino trio tratorbody (i me	to than our be entered here, prease at	aon a suppomentariloty.
a. Address-					
City -		State -		Zip -	
h. Address					
b. Address-					
City -		State -		Zip -	
. Addus .					
c. Address-					
City -		State -		Zip -	
d Addroso					
d. Address-					
City -		State -		Zip -	
e. Address-					
e. Address-					
City -		State -		Zip -	
26. List of Other Certific	cates or Approvals/Denials rec	eived from other Federal, S	State, or Local Agencies for	or Work Described in This Ap	plication.
AGENCY	TYPE APPROVAL*	IDENTIFICATION NUMBER	DATE APPLIED	DATE APPROVED	DATE DENIED
	ot restricted to zoning, building				
<ol> <li>Application is herebecomplete and accurate.</li> <li>applicant.</li> </ol>	by made for permit or permits to I further certify that I possess	o authorize the work descri the authority to undertake	bed in this application. I detection the work described herein	certify that this information in n or am acting as the duly aut	this application is horized agent of the
CICNIATIU		DATE	CIONATURE OF ACENT		
	SIGNATURE OF APPLICANT  he Application must be signed by the person who		SIGNATURE OF AGENT the proposed activity (applicant) or it may be significant.		DATE Ined by a duly
	e statement in block 11 has			(	,
18 U.S.C. Section 10	01 provides that: Whoever,	in any manner within th	e jurisdiction of any de	epartment or agency of the	United States
	y falsifies, conceals, or cov				

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statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent

statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five years or both.