



DIVISION OF FISH AND WILDLIFE ENVIRONMENTAL REVIEW REQUEST FORM



State of Delaware
Department of Natural Resources and Environmental Control

DATE: I acknowledge the \$35/hr cost recovery fee

PROJECT TITLE:

CONTACT INFORMATION:

Applicant Name: Consulting Company:

Consultant Name: Consultant Email:

Mailing Address:

PROJECT DETAILS:

Description

Project Type: Consultation Needed For:

Detailed Project Description:

Location

Parcel Number(s):

GPS Coordinates of Project:

Address:

County:

Shapefile of LOD Enclosed?

Image of LOD Enclosed?

Environmental Impacts

Forest: Forest Removal? Acres of Forest Removal:

Wetlands: Wetland Impacts? Acres of Impacts (Temporary/Permanent):

Open Water: Water Impacts? Acres of Impacts (Temporary/Permanent):

Please email completed form and associated documents to DNREC_EnvReview@delaware.gov