

U.S. Army Corps of Engineers South Pacific Division



Nationwide Permit Pre-Construction Notification (PCN) Form

This form integrates requirements of the U.S. Army Corps of Engineers Nationwide Permit Program within the South Pacific Division (SPD), including General and Regional Conditions. You **MUST** fill out all boxes related to the work being done. Fillable boxes in this form expand if additional space is needed.

Box 1 Project Name			
Applicant Name		Applicant Title	
Applicant Company, Agency, etc.		Applicant's internal tracking number (if any)	
Mailing Address			
Work Phone with area code	Mobile Phone with area code	Home Phone with area code	Fax # with area code
E-mail Address		Relationship of applicant to property: <input type="checkbox"/> Owner <input type="checkbox"/> Purchaser <input type="checkbox"/> Lessee <input type="checkbox"/> Other:	
Application is hereby made for verification that subject regulated activities associated with subject project qualify for authorization under a U.S. Army Corps of Engineers Nationwide Permit or Permits as described herein. I certify that I am familiar with the information contained in this application and, that to the best of my knowledge and belief, such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the agency to which this application is made the right to enter the above-described location to inspect the proposed, in-progress or completed work. I agree to start work <u>only</u> after all necessary permits have been received and to comply with all terms and conditions of the authorization.			
Signature of applicant			Date (mm/dd/yyyy)

If anyone other than the person named as the Applicant will be in contact with the U.S. Army Corps of Engineers representing the Applicant regarding this project during the permit process, Box 2 **MUST** be filled out.

Box 2 Authorized Agent/Operator Name		Agent/Operator Title	
Agent/Operator Company, Agency, etc.		E-mail Address	
Mailing Address			
Work Phone with area code	Mobile Phone with area code	Home Phone with area code	Fax # with area code
I hereby authorize the above named authorized agent to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application. I understand that I am bound by the actions of my agent and I understand that if a federal or state permit is issued, I, or my agent, must sign the permit.			
Signature of applicant			Date (mm/dd/yyyy)
I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief, such information is true, complete, and accurate.			
Signature of authorized agent			Date (mm/dd/yyyy)

Box 6 Reason(s) for discharge into Waters of the United States (Description of why dredged and/or fill material needs to be placed in Waters of the United States):

Proposed discharge of dredge and/or fill material. Indicate total surface area in **acres** and **linear feet** (where appropriate) of the proposed impacts to Waters of the United States, indicate water body type (tidal wetland, non-tidal wetland, riparian wetland, ephemeral stream/river, intermittent stream/river, perennial stream/river, pond/lake, vegetated shallows, bay/harbor, lagoon, ocean, etc.), and identify the impact(s) as permanent and/or temporary for each requested Nationwide Permit¹:

¹ Enter the intended permit number(s). See Nationwide Permit regulations for permit numbers and qualification information: <http://www.usace.army.mil/Missions/CivilWorks/RegulatoryProgramandPermits/NationwidePermits.aspx>

Water Body Type	Requested NWP Number:				Requested NWP Number:				Requested NWP Number:				
	Permanent		Temporary		Permanent		Temporary		Permanent		Temporary		
	Area	Length	Area	Length	Area	Length	Area	Length	Area	Length	Area	Length	
Total:													

Total volume (in cubic yards) and type(s) of material proposed to be dredged from or discharged into Waters of the United States:

Material Type	Total Volume Dredged	Total Volume Discharged
Rock Slope Protection (RSP)		
Clean spawning gravel		
River rock		
Soil/Dirt/Silt/Sand/Mud		
Concrete		
Structure		
Stumps/Root wads		
Other:		
Total:		

Activity requires a written waiver to exceed specified limits of the Nationwide Permit? Yes No
 If yes, provide Nationwide Permit number and name, limit to be exceeded, and rationale for each requested waiver:

Activity will result in the loss of greater than 1/2-acre of Waters of the United States? Yes No
 If yes, provide an electronic copy (compact disc) or multiple hard copies (7) of the complete PCN for appropriate Federal and State Pre-discharge Notification (See General Condition #31, Pre-construction Notification, Agency Coordination, Section 2 and 4)"

Describe direct and indirect effects caused by the activity and how the activity has been designed (or modified) to have minimal adverse effects on the aquatic environment (See General Condition #31, Pre-construction Notification, District Engineer's Decision, Section 1):

Potential cumulative impacts of proposed activity (if any):

Required drawings and figures (see each U.S. Army Corps of Engineers District's Minimum Standards Guidance):

Vicinity map: Attached (or mail copy separately if applying electronically)

To-scale Plan view drawing(s): Attached (or mail copy separately if applying electronically)

To-scale elevation and/or Cross Section drawing(s): Attached (or mail copy separately if applying electronically)

Numbered and dated pre-project color photographs: Attached (or mail copy separately if applying electronically)

Sketch drawing(s) or map(s): Attached (or mail copy separately if applying electronically)

Has a wetlands/waters of the U.S. delineation been completed?

Yes, Attached² (or mail copy separately if applying electronically) No

If a delineation has been completed, has it been verified in writing by the Corps?

Yes, Date of preliminary or approved jurisdictional determination (mm/dd/yyyy). Corps file number: Bc

²If available, provide ESRI shapefiles (NAD83) for delineated waters

For proposed discharges of dredged material resulting from navigation dredging into inland or near-shore waters of the U.S. (including beach nourishment), please attach³ a proposed Sampling and Analysis Plan (SAP) prepared according to Inland Testing Manual (ITM) guidelines (including Tier I information, if available), or if disposed offshore, a proposed SAP prepared according to the Ocean Disposal Manual.

³Or mail copy separately if applying electronically

Is any portion of the work already complete? YES NO

If yes, describe the work:

Box 7 Authority:

Is Section 10 of the Rivers and Harbors Act applicable?: YES NO

Is Section 404 of the Clean Water Act applicable?: YES NO

Is the project located on U.S. Army Corps of Engineers property or easement?: YES NO

If yes, has Section 408 process been initiated?: YES NO

Would the project affect a U.S. Army Corps of Engineers structure?: YES NO

If yes, has Section 408 process been initiated?: YES NO

Is the project located on other Federal Lands (USFS, BLM, etc.)?: YES NO

Is the project located on Tribal Lands?: YES NO

Box 8 Is the discharge of fill or dredged material for which Section 10/404 authorization is sought part of a larger plan of development?: YES NO

If discharge of fill or dredged material is part of development, name and proposed schedule for that larger development (start-up, duration, and completion dates):

Location of larger development (if discharge of fill or dredged material is part of a plan of development, a map of suitable quality and detail of the entire project site should be included):

Box 9 Measures taken to avoid and minimize impacts to waters of the United States:

Box 10 Proposed Compensatory Mitigation related to fill/excavation and dredge activities. Indicate in **acres** and **linear feet** (where appropriate) the total quantity of Waters of the United States proposed to be created, restored, enhanced and/or preserved for purposes of providing compensatory mitigation. Indicate water body type (tidal wetland, non-tidal wetland, riparian wetland, ephemeral stream/river, intermittent stream/river, perennial stream/river, pond/lake, vegetated shallows, bay/harbor, lagoon, ocean, etc.) or non-jurisdictional (uplands¹). Indicate mitigation type (permittee-responsible on-site/off-site, mitigation bank, or in-lieu fee program). If the mitigation is purchase of credits from a mitigation bank, indicate the bank to be used, if known:

¹ For uplands, please indicate if designed as an upland buffer.

Site Number	Water Body Type	Created		Restored		Enhanced		Preserved		Mitigation Type
		Area	Length	Area	Length	Area	Length	Area	Length	
Total:										

If no mitigation is proposed, provide detailed explanation of why no mitigation would be necessary:

If permittee-responsible mitigation is proposed, provide justification for not utilizing a Corps-approved mitigation bank or in-lieu fee program:

Has a draft/conceptual mitigation plan been prepared in accordance with the April 10, 2008, Final Mitigation Rule² and District Guidelines?

²http://www.usace.army.mil/Missions/CivilWorks/RegulatoryProgramandPermits/mitig_info.aspx

³**Sacramento and San Francisco Districts**-http://www.spk.usace.army.mil/organizations/cespk-co/regulatory/pdf/Mitigation_Monitoring_Guidelines.pdf

⁴**Los Angeles District**-http://www.spl.usace.army.mil/regulatory/mmg_2004.pdf

⁵**Albuquerque District**-http://www.spa.usace.army.mil/reg/mitigation/SPA%20Final%20Mitigation%20Guidelines_OLD.pdf

Yes, Attached (or mail copy separately if applying electronically) No

If no, a mitigation plan must be prepared and submitted, if applicable.

Mitigation site(s) Latitude & Longitude (D/M/S, DD, or UTM with Zone):	USGS Quadrangle map name(s):
Assessor Parcel Number(s):	Section(s), Township(s), Range(s):

Other location descriptions, if known:

Directions to the mitigation location(s):

Box 11 Threatened or Endangered Species

Please list any federally-listed (or proposed) threatened or endangered species or critical habitat (or proposed critical habitat) within the project area (include scientific names (e.g., Genus species), if known):

- | | |
|----|----|
| a. | b. |
| c. | d. |
| e. | f. |

Have surveys, using U.S. Fish and Wildlife Service/NOAA Fisheries protocols, been conducted?

Yes, Report attached (or mail copy separately if applying electronically) No

If a federally-listed species would be impacted, please provide a description of the impact and a biological evaluation, if available.

Yes, Report attached (or mail copy separately if applying electronically) Not attached

Has Section 7 consultation been initiated by another federal agency?

Yes, Initiation letter attached (or mail copy separately if applying electronically) No

Has Section 10 consultation been initiated for the proposed project?

Yes, Initiation letter attached (or mail copy separately if applying electronically) No

Has the USFWS/NOAA Fisheries issued a Biological Opinion?

Yes, Attached (or mail copy separately if applying electronically) No

If yes, list date Opinion was issued (m/d/yyyy):

Box 12 Historic properties and cultural resources:

Are any cultural resources of any type known to exist on-site? Yes No

Please list any known historic properties listed, or eligible for listing, on the National Register of Historic Places:

- | | |
|----|----|
| a. | b. |
| c. | d. |
| e. | f. |

Has a cultural resource records search been conducted?

Yes, Report attached (or mail copy separately if applying electronically) No

Has a cultural resource pedestrian survey been conducted for the site?

Yes, Report attached (or mail copy separately if applying electronically) No

Has another federal agency been designated the lead federal agency for Section 106 consultation?

Yes, Designation letter/email attached (or mail copy separately if applying electronically) No

Has Section 106 consultation been initiated by another federal agency?

Yes, Initiation letter attached (or mail copy separately if applying electronically) No

Has a Section 106 MOA or PA been signed by another federal agency and the SHPO?

Yes, Attached (or mail copy separately if applying electronically) No

If yes, list date MOA or PA was signed (m/d/yyyy):

Box 13 Section 401 Water Quality Certification:

Applying for certification? Yes, Attached (or mail copy separately if applying electronically) No

Certification issued? Yes, Attached (or mail copy separately if applying electronically) No

Certification waived? Yes, Attached (or mail copy separately if applying electronically) No

Certification denied? Yes, Attached (or mail copy separately if applying electronically) No

Exempted activity? Yes No

Agency concurrence? Yes, Attached No

If exempt, state why:

Box 14 Coastal Zone Management Act:

Is the project located within the Coastal Zone? Yes No

If yes, applying for a coastal commission-approved Coastal Development Permit?

Yes, Attached (or mail copy separately if applying electronically) No

If no, applying for separate CZMA-consistency certification?

Yes, Attached (or mail copy separately if applying electronically) No

Permit/Consistency issued? Yes, Attached (or mail copy separately if applying electronically) No

Exempt? Yes No

Agency concurrence? Yes, Attached No

If exempt, state why:

Box 15 List of other certifications or approvals/denials received from other federal, state, or local agencies for work described in this application:

Agency	Type of Approval ⁴	Identification Number	Date Applied	Date Approved	Date Denied

⁴Would include but is not restricted to zoning, building, and flood plain permits

Nationwide Permit General Conditions (GC) checklist:

(<http://www.gpo.gov/fdsys/pkg/FR-2012-02-21/pdf/2012-3687.pdf>)

Check	General Condition	Rationale for compliance with General Condition
<input type="checkbox"/>	1. Navigation	
<input type="checkbox"/>	2. Aquatic Life Movements	
<input type="checkbox"/>	3. Spawning Areas	
<input type="checkbox"/>	4. Migratory Bird Breeding Areas	
<input type="checkbox"/>	5. Shellfish Beds	
<input type="checkbox"/>	6. Suitable Material	
<input type="checkbox"/>	7. Water Supply Intakes	
<input type="checkbox"/>	8. Adverse Effects from Impoundments	
<input type="checkbox"/>	9. Management of Water Flows	
<input type="checkbox"/>	10. Fills Within 100-Year Floodplains	
<input type="checkbox"/>	11. Equipment	
<input type="checkbox"/>	12. Soil Erosion and Sediment Controls	
<input type="checkbox"/>	13. Removal of Temporary Fills	
<input type="checkbox"/>	14. Proper Maintenance	

<input type="checkbox"/>	15. Single and Complete Project	
<input type="checkbox"/>	16. Wild and Scenic Rivers	
<input type="checkbox"/>	17. Tribal Rights	
<input type="checkbox"/>	18. Endangered Species	See Box 11 above.
<input type="checkbox"/>	19. Migratory Bird and Bald and Golden Eagle Permits	
<input type="checkbox"/>	20. Historic Properties	See Box 12 above.
<input type="checkbox"/>	21. Discovery of Previously Unknown Remains and Artifacts	
<input type="checkbox"/>	22. Designated Critical Resource Waters	
<input type="checkbox"/>	23. Mitigation	See Box 10 above.
<input type="checkbox"/>	24. Safety of Impoundment Structures	
<input type="checkbox"/>	25. Water Quality	See Box 13 above.
<input type="checkbox"/>	26. Coastal Zone Management	See Box 14 above.
<input type="checkbox"/>	27. Regional and Case-by-Case Conditions	
<input type="checkbox"/>	28. Use of Multiple Nationwide Permits	
<input type="checkbox"/>	29. Transfer of Nationwide Permit Verifications	
<input type="checkbox"/>	30. Compliance Certification	
<input type="checkbox"/>	31. Pre-Construction Notification	