U.S. ARMY CORPS OF ENGINEERS APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT

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

Form Approved -OMB No. 0710-0003 Expires: 31-AUGUST-2013

Public reporting for this collection of information 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 this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters, Executive Services and Communications Directorate, Information Management Division and to the Office of Management and Budget, Paperwork Reduction Project (0710-0003). 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 form to either of those addresses. Completed applications must be submitted to the District Engineer having jurisdiction over the location of the proposed activity.

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.

		(ITE	VIS 1 THRU 4 TO E	BE FILLED BY THE C	CORPS)				
1. APPLICATION NO.		2. FIELD OFFICE CODE		3. DATE RECEIV	3. DATE RECEIVED		4. DATE APPLICATION COMPLETE		
(ITEMS BELOW TO BE FILLED BY APPLICANT)									
5. APPLICANT'S NAME AND TITLE (agent is not requi						is not required)			
First -	Middle -	Last -		First -	Middle -	Las	st -		
Company -				Company -					
E-mail Address -				E-mail Address -					
6. APPLICANT'S ADDRE	ESS:			9. AGENT'S ADD	9. AGENT'S ADDRESS:				
Address-				Address-					
City -	State -	Zip -	Country -	City -	State -	Zip -	Country -		
7. APPLICANT'S PHONE NOs. w/AREA CODE				10. AGENTS PHO	10. AGENTS PHONE NOs. w/AREA CODE				
a. Residence	b. Business	s c. Fa	ax	a. Residence	b. Busines	SS C.	Fax		
			STATEMENT C	OF AUTHORIZATION	1				
11. I hereby authorize, 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.									
SIGNATURE OF APPLICANT DATE									
		NAME, LOCA	TION, AND DESC	RIPTION OF PROJE	CT OR ACTIVITY				
12. PROJECT NAME OF	₹ TITLE (see	instructions)							
13. NAME OF WATERBODY, IF KNOWN (if applicable)			14. PROJECT ST	14. PROJECT STREET ADDRESS (if applicable)					
				Address	Address				
15. LOCATION OF PRO	JECT			City	c	21-10	7:~		
Latitude: ∘N		Longitude: •W		City -		State-	Zip-		
16. OTHER LOCATION I	DESCRIPTIO	NS, IF KNOWN (se	e instructions)						
State Tax Parcel ID			Municipality						
Section -	Tov	wnship -		Range -					

17. DIRECTIONS TO THE SITE			
18. Nature of Activity (Description of pro	oject, include all features)		
19. Project Purpose (Describe the reason	on or purpose of the project, see instructions)		
USE	BLOCKS 20-23 IF DREDGED AND/OR FILL MATERIAL	IS TO BE DISCHARGED	
20. Reason(s) for Discharge			
121 Type(s) of Material Being Discharge	ed and the Amount of Each Type in Cubic Yards:		
Type	Type	Type	
		Type Amount in Cubic Yards	
Type	Type	Type Amount in Cubic Yards	
Type Amount in Cubic Yards	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
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Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres or Linear Feet	Type Amount in Cubic Yards or Other Waters Filled (see instructions)	Type Amount in Cubic Yards	
Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres or Linear Feet	Type Amount in Cubic Yards	Type Amount in Cubic Yards	
Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres or Linear Feet	Type Amount in Cubic Yards or Other Waters Filled (see instructions)	Type Amount in Cubic Yards	
Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres or Linear Feet	Type Amount in Cubic Yards or Other Waters Filled (see instructions)	Type Amount in Cubic Yards	
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Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands of Acres or Linear Feet	Type Amount in Cubic Yards or Other Waters Filled (see instructions)	Type Amount in Cubic Yards	

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24. Is Any Portion of the Work Already Complete? Yes No IF YES, DESCRIBE THE COMPLETED WORK							
25. Addresses of Adjoining	ng Property Owners, Lesse	es, Etc., Whose Property Ad	djoins the Waterbody (if mor	e than can be entered here, please	attach a supplemental list).		
a. Address-							
City -		State -	Zip -				
b. Address-							
City -		State -	Zip -				
c. Address-							
City -		State -	Zip -				
d. Address-							
City -		State -	Zip -				
e. Address-							
City -		State -	Zip -				
26. List of Other Certifica	tes or Approvals/Denials red	ceived from other Federal, S IDENTIFICATION	State, or Local Agencies fo	r Work Described in This A	pplication.		
AGENCY	TYPE APPROVAL*	NUMBER	DATE APPLIED	DATE APPROVED	DATE DENIED		
	t restricted to zoning, buildin	· · ·	ihed in this application. Lo	ertify that this information in	n this application is		
	further certify that I possess						
SIGNATURE OF APPLICANT		DATE	SIGNATURE OF AGENT DAT				
	pe signed by the person vertatement in block 11 ha			applicant) or it may be s	igned by a duly		
	1 provides that: Whoever						
	falsifies, conceals, or covor representations or ma						
	or entry, shall be fined no						

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