



JOINT APPLICATION FORM

For Permits for activities activities affecting streams, waterways, waterbodies, wetlands, coastal areas, sources of water, and endangered and threatened species.

You must separately apply for and obtain Permits from each involved agency before starting work. Please read all instructions.

1. Applications To: >NYS Department of Environmental Conservation Check here to confirm you sent this form to NYSDEC.			
>NYS Department of Environmental Conservation Check here to confirm you sent this form to NYSDEC. Check all permits that apply: Dams and Impoundmental Well Water Withdrawal Stream Disturbance ment Structures Wild, Scenic and Long Island Well Excavation and Fill in Navigable Waters 401 Water Quality Certification * Incidental Take of Endangered / Threatened Species Docks, Moorings or Platforms Freshwater Wetlands * See Instructions Page 3 >US Army Corps of Engineers Check here to confirm you sent this form to USACE. Check all permits that apply: Section 404 Clean Water Act Section 10 Rivers and Harbors Act Is the project Federally funded? Yes No If yes, name of Federal Agency: General Permit Type(s), if known: Preconstruction Notification: Preconstruction Notification: Yes No	3		
>NYS Office of General Services Check here to confirm you sent this form to NYSOGS. Check all permits that apply: State Owned Lands Under Water Utility Easement (pipelines, conduits, cables, etc.) Docks, Moorings or Platforms >NYS Department of State Check here to confirm you sent this form to NYSDOS. Check if this applies: Coastal Consistency Concurrence			
2. Name of Applicant Taxpayer ID (if applicant is NOT an individual) Mailing Address Post Office / City State Zip Mailing Address Email Image: Comparison of the state of			
3. Name of Property Owner (if different than Applicant) Mailing Address Post Office / City State Zip Telephone Email			

Agency Application Number:

For Agency Use Only

JOINT APPLICATION FORM – Continued. Submit this completed page as part of your Application.

4. Name of Contact / Agent				
Mailing Address	Post Office / City State Zip			
Telephone Email				
5. Project / Facility Name	Property Tax Map Section / Block / Lot Number:			
Dreiget Ctreat Address, if applicable				
Project Street Address, if applicable Post Office / City State Zip NY NY				
Provide directions and distances to roads, intersections, bric	Iges and bodies of water			
☐ Town ☐ Village ☐ City County	Stream/Waterbody Name			
Project Location Coordinates: Enter Latitude and Longitude	in degrees minutes seconds:			
Latitude: ° '"	Longitude:°'"			
 Project Description: Provide the following information a any additional information on other pages. <u>Attach plans on</u> 				
a. Purpose of the proposed project:				
b. Description of current site conditions:				
c. Proposed site changes:				
d. Type of structures and fill materials to be installed, and c				
coverage, cubic yards of fill material, structures below ordinary/mean high water, etc.):				
Area of excavation or dredging volume of material to be	removed location of dradand material placement			
e. Area of excavation or dredging, volume of material to be removed, location of dredged material placement:				
f. Is tree cutting or clearing proposed?	es, explain below.			
Timing of the proposed cutting or clearing (month/year):				
Number of trees to be cut:	eage of trees to be cleared:			

g. Work methods and type of equipment to be used:
h. Describe the planned sequence of activities:
i Rollution control methods and other actions proposed to mitigate environmental impacts:
i. Pollution control methods and other actions proposed to mitigate environmental impacts:
j. Erosion and silt control methods that will be used to prevent water quality impacts:
k. Alternatives considered to avoid regulated areas. If no feasible alternatives exist, explain how the project will
minimize impacts:
I. Proposed use: Private Public Commercial
m. Proposed Start Date:
n. Has work begun on project? Us If Yes, explain below. No
o. Will project occupy Federal, State, or Municipal Land? Ves If Yes, explain below. No
p. List any previous DEC, USACE, OGS or DOS Permit / Application numbers for activities at this location:
q. Will this project require additional Federal, State, or Local authorizations, including zoning changes?
\square Yes If Yes, list below. \square No

7. Signatures.

Applicant and Owner (If different) must sign the application. If the applicant is the landowner, the **landowner attestation form** can be used as an electronic signature as an alternative to the signature below, if necessary. Append additional pages of this Signature section if there are multiple Applicants, Owners or Contact/Agents.

I hereby affirm that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief.

Permission to Inspect - I hereby consent to Agency inspection of the project site and adjacent property areas. Agency staff may enter the property without notice between 7:00 am and 7:00 pm, Monday - Friday. Inspection may occur without the owner, applicant or agent present. If the property is posted with "keep out" signs or fenced with an unlocked gate, Agency staff may still enter the property. Agency staff may take measurements, analyze site physical characteristics, take soil and vegetation samples, sketch and photograph the site. I understand that failure to give this consent may result in denial of the permit(s) sought by this application.

False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the NYS Penal Law. Further, the applicant accepts full responsibility for all damage, direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and agrees to indemnify and save harmless the State from suits, actions, damages and costs of every name and description resulting from said project. In addition, Federal Law, 18 U.S.C., Section 1001 provides for a fine of not more than \$10,000 or imprisonment for not more than 5 years, or both where an applicant knowingly and willingly falsifies, conceals, or covers up a material fact; or knowingly makes or uses a false, fictitious or fraudulent statement.

Date

Signature of Applicant

Applicant Must be (check all that apply): Owner Printed Name	Operator Lessee
Signature of Owner (if different than Applicant) Printed Name	Date
Signature of Contact / Agent Printed Name	Date

For Agenc	y Use Only DETERMINATION OF NO PER	RMIT REQUIRED		
Agency Application Number				
	(Ag	ency Name) has determined that No Permit is		
required from this Agency for the project described in this application.				
Agency Re	presentative:			
Printed		Title		
Name				
Signature		Date		