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| Exec Letterhead Color | **State Water Board Certification of the**  **2017 Nationwide Permits**  **Notice of Intent** |

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| **Section 1: Nationwide Permit Number** | | | | | | | | | | | | | | | | |
| **Scientific Measurement Devices** | | | | | | **NWP 5** | | | **Modification of Existing Marinas** | | | | | | | **NWP 28** |
| **Survey Activities** | | | | | | **NWP 6** | | | **Completed Enforcement Actions** | | | | | | | **NWP 32** |
| **Utility Line Activities** | | | | | | **NWP 12** | | | **Boat Ramps** | | | | | | | **NWP 36** |
| **Removal of Vessels** | | | | | | **NWP 22** | | | **Living Shorelines** | | | | | | | **NWP 54** |
| **Section 2: Applicant and Agent Information** | | | | | | | | | | | | | | | | |
|  | | | | | **Applicant:** | | | | | | **Agent:** | | | | | |
| **Company/ Agency Name:** | | | | |  | | | | | |  | | | | | |
| **Name of Contact:** | | | | |  | | | | | |  | | | | | |
| **Title:** | | | | |  | | | | | |  | | | | | |
| **Address:** | | | | |  | | | | | |  | | | | | |
| **City, State, Zip:** | | | | |  | | | | | |  | | | | | |
| **Phone Number(s):** | | | | |  | | | | | |  | | | | | |
| **Email Address:** | | | | |  | | | | | |  | | | | | |
| **Section 3: Fees** | | | | | | | | | | | | | | | | |
| **Application Fee: Attach a fee check payable to the State Water Board.** | | | | | | | | | | | | | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Section 4: Other Agency Permits/ Licenses/ Agreements/ Plans/ Email correspondence**  **(attach application if final action not yet taken):** | | | | | | **Agency:** | **Have you applied?:** | **If yes, have you received the permit?:** | **Permit type:** | **ID number (e.g. Corps file number):** | | **☐** **Corps NWP PCN (for notifying NWPs 11,12,22, 36 and 54)** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐ USFWS** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐** **NMFS** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐** **Other Federal Permit** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐ CDFW Lake or SAA** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐** **Coastal Development Permit** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐ Other State Permits** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐** **Local Permit(s)** | **Y☐ N☐** | **Y☐ N☐** |  |  | | **☐** **SWPPP** | **Y☐ N☐** | **Y☐ N☐** |  |  | | | | | | | | | | | | | | | | | |
| **Section 5: Project Information** | | | | | | | | | | | | | | | | |
| **Project Name:** | | | | | | | | | | | | | | | | |
| **Center Coordinate** | **Deg.** | | | **Min.** | | | | **Sec. N** | | **Deg.** | | **Min.** | | | **Sec. W** | |
| **Project Address: Street:** | | | | | | | | | | | | | | | | |
| **Section 5: Project Information (cont.)** | | | | | | | | | | | | | | | | |
| **City:** | | **Zip Code:** | | | | | **County:** | | | | | | **APN:** | | | |
| **Construction Timeframe (Provide approximate start and end dates):** | | | | | | | | | | | | | | | | |
| **Project Description/Purpose:** | | | | | | | | | | | | | | | | |
| **Section 6: Avoidance, Minimization and Cumulative Impacts** | | | | | | | | | | | | | | | | |
| **Avoidance and Minimization:** | | | | | | | | | | | | | | | | |
| **Cumulative Impacts:** | | | | | | | | | | | | | | | | |
| **Section 7: Temporary Impacts, Permanent Impacts and Compensatory Mitigation Information** | | | | | | | | | | | | | | | | |
| **Temporary Impacts: Would your project result in temporary impacts? Yes**  **No**  **If yes, attach the restoration plan**. | | | | | | | | | | | | | | | | |
| **Total temporary impacts: acre linear feet** | | | | | | | | | | | | | | | | |
| **Riparian Tree Removal: Would your project result in the removal of riparian trees? Yes**  **No**  **If yes, use this table for each adult tree proposed for removal (or attach a similar table if additional rows are needed):** | | | | | | | | | | | | | | | | |
| **Species:** | | | **Common name:** | | | | | | **Diameter Breast Height:** | | | | | **Circle to indicate whether the individual is part of the: Overstory Understory** | | |
|  | | |  | | | | | |  | | | | | **Overstory Understory** | | |
|  | | |  | | | | | |  | | | | | **Overstory Understory** | | |
| **Permanent Impacts: Would your project result in permanent impacts? Yes**  **No**  **If submitting an NOI for NWP 12: has your irrevocable letter of credit been submitted? Yes**  **No**  **If no, do not proceed with this NOI.** | | | | | | | | | | | | | | | | |
| **Total permanent impacts: acre linear feet** | | | | | | | | | | | | | | | | |

| **Table 1: Receiving Water(s) Information** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Impact Site ID** | **Waterbody Name** | **Impacted Aquatic Resource Type** | **Water Board Hydrologic Units** | **Receiving Waters** | **Receiving Waters Beneficial Uses** | **303d Listing**  **Pollutant** | **eCRAM ID** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Table 2: Individual Direct Impact Information** | | | | | | | |

| **Impact Site ID** | **Latitude** | | **Longitude** | | **Direct Impact Dimensions** | **Dredge** | | | | **Fill/Excavation** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Acres** | **Cubic Yards** | **Linear Feet** | **Acres** | | **Cubic Yards** | **Linear Feet** |
| 1 |  | |  | | **Temporary** |  |  |  |  | |  |  |
| **Permanent** |  |  |  |  | |  |  |
| 2 |  | |  | | **Temporary** |  |  |  |  | |  |  |
| **Permanent** |  |  |  |  | |  |  |
| 3 |  | |  | | **Temporary** |  |  |  |  | |  |  |
| **Permanent** |  |  |  |  | |  |  |
| 4 |  | |  | | **Temporary** |  |  |  |  | |  |  |
| **Permanent** |  |  |  |  | |  |  |
| 5 |  | |  | | **Temporary** |  |  |  |  | |  |  |
| **Permanent** |  |  |  |  | |  |  |
|  | |  | |  | **Total Temporary** |  |  |  |  | |  |  |
|  | |  | |  | **Total Permanent** |  |  |  |  | |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section 8: Documentation** | | | | | |
| **Check any of the following documents that are applicable to your Project and attach copies to your NOI:** | | | | | |
| **☐ Fee check** | | **☐ Other agency correspondence listed** | | | **☐ Delineation report submitted to the Corps** |
| **☐ Riparian trees proposed for**  **removal** | | **☐ Temporary impact restoration plan** | | | **☐ Map of at least 1:24000 (1” = 2000’) detail of proposed discharge site** |
| **☐ Pre-project photographs** | | **☐ Additional pages and/or supplemental information** | | |  |
| **Section 9: Applicant and Agent Signature** | | | | | |
| *I hereby designate and authorize the agent/consultant identified in Section 1 to act on my behalf in the processing of this Notice of Intent, and to furnish, upon request, supplemental information in support of this notice:* | | | | | |
| **Applicant Name** |  | | **Applicant Signature** |  | |
| *I certify that the information provided on this form and all attachments related to this project are true and accurate to the best of my knowledge:* | | | | | |
| **Applicant Name** |  | | **Applicant Signature** |  | |
| **Agent Name** |  | | **Agent Signature** |  | |

|  |  |
| --- | --- |
| **For Internal Water Board Use** | |
| **Reviewer** |  |
| **Date Received** |  |
| **Reg. Measure ID** |  |
| **WDID** |  |
| **Check #** |  |

**Submit the completed Notice of Intent, attachment and fees to the appropriate Regional Water Board, or to the State Water Board for NWP 12 projects or for multi-regional projects.**