

**Federal Lands Permit
Attachment D
Notice of Intent**

1. PROJECT INFORMATION

Project Title:	Click here to enter text.
Primary Contact (Name, Title):	Click here to enter text.
Telephone:	Click here to enter text.
E-mail:	Click here to enter text.

2. FEDERAL AGENCY INFORMATION

Federal Agency:	Click here to enter text.
Administrative Unit:	Click here to enter text.
Ranger District (If applicable):	Click here to enter text.
Street Address:	Click here to enter text.
City, County, State, Zip:	Click here to enter text.

3. PROJECT LOCATION

Sixth-Field Watershed(s):	Click here to enter text.
Receiving Waterbody Name(s):	Click here to enter text.
Check box to verify that a map of at least 1:24000 (1" = 2000') detail of the proposed project area is enclosed:	<input type="checkbox"/> Project Map Enclosed

4. PROJECT NEPA INFORMATION

NEPA Document ID(s):	Click here to enter text.
NEPA document type(s):	<input type="checkbox"/> EIS <input type="checkbox"/> EA <input type="checkbox"/> CE <input type="checkbox"/> DNA
NEPA Decision Date (If applicable):	Click here to enter text.
Check box to verify that project NEPA document(s) in PDF format is/are enclosed:	<input type="checkbox"/> Project NEPA Document Enclosed <input type="checkbox"/> Project NEPA Decision Enclosed (if applicable)

5. PROJECT SIZE AND SCHEDULE

Size (acres):	Click here to enter text.
Estimated start date (month/year):	Click here to enter text.
Estimated end date (month/year):	Click here to enter text.
Estimated total number of workdays:	Click here to enter text.
Is this a phased project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If answered “yes” above, please identify the project phase number:	Click here to enter text.

6. PROJECT DESCRIPTION

Project Activities (<i>check one or more boxes below</i>)
<p>Category B Activities</p> <p><input type="checkbox"/> Timber Harvesting <input type="checkbox"/> Vegetation/Fuels Management <input type="checkbox"/> Tribal Cultural/Understory/Pile Burning in Riparian</p> <p><input type="checkbox"/> Non-Emergency Burned Area Rehabilitation/Fire Recovery <input type="checkbox"/> Road/Watercourse Crossing Work</p> <p><input type="checkbox"/> Controllable Sediment Discharge Source Treatment <input type="checkbox"/> Livestock Grazing <input type="checkbox"/> CCR § 15269¹</p> <p><input type="checkbox"/> Other: Click here to enter text.</p>
Describe the proposed project purpose, goals, and activities. Reference to specific NEPA document sections is acceptable. Please indicate the page number(s) within the appropriate NEPA document where pertinent information may be found.
Click here to enter text.

¹ Activities conducted pursuant to CCR section 15269 must complete the last question of Section 6, Project Description.

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<p>Check box to verify that document(s) containing Best Management Practices and Project Design Features (or equivalent) are enclosed:</p>	<p><input type="checkbox"/> Project Best Management Practices and Project Design Features (or equivalent) Enclosed</p>
<p>Please indicate the page number(s) within the enclosed document(s) where project Best Management Practices and Project Design Features (or equivalent) are located:</p>	<p>Click here to enter text.</p>
<p>Are these Project activities intended to support accrual of treatment credits as required by the WARP?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If answered “yes” above, please provide a brief description of the type of activities, and estimate the total number of WARP treatment credits anticipated to be generated:</p>	<p>Click here to enter text.</p>
<p>Will project activities result in the reduction of net potential effective shade (i.e., riparian canopy cover)²?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If answered “yes” above, please provide a justification including the following information:</p> <ul style="list-style-type: none"> - the proposed canopy reduction and expected recovery time; - an estimate of the pre- and post-project shade or solar impacts; and - how such an exception will result in a net long-term benefit to water quality and stream temperatures. 	<p>Click here to enter text.</p>
<p>Will project activities result in the removal of mature streambank trees that contribute to bank stability?³ If so, please provide explanation below.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

² Order Condition E.2. states, “Activities on federal lands shall be protective of site-specific potential effective shade conditions as described in the Temperature Policy, Resolution No. R1-2014-0006.” Order Condition E.3. allows exemptions to Condition E.2. to be considered if they protect or enhance site-specific potential effective shade conditions.

³ Order Condition E.4. States, “Federal Agencies shall retain mature stream bank trees and their roots that provide or contribute to stream bank stability for ephemeral, intermittent, and perennial watercourses.” Order Condition E.5. allows for exceptions to Condition E.4. to be considered on a case-by-case basis.

<p>If answered “yes” above, please describe the nature of and a justification for removal of streambank trees:</p>	<p>Click here to enter text.</p>
<p>Please answer the questions below if emergency response activities were conducted pursuant to CCR § 15269:</p> <ul style="list-style-type: none"> a. How the project meets the description under CCR § 15269. b. Measures implemented to minimize disturbance in riparian reserves, including roads and landings. c. Discharge avoidance measures (e.g., road treatment BMPs, soil stabilization measures, seasonal operation restrictions, etc.) d. Any additional water quality protection measures. 	<p>Click here to enter text.</p>

7. MONITORING AND REPORTING PLAN COMPLIANCE

<p>The Federal Lands Permit contains an attached Monitoring and Reporting Program, No. R1-2024-0012, that all Federal Agencies must review and comply with.</p>
<p><input type="checkbox"/> The Category B project requirements in the Monitoring and Reporting Program, including, but not limited to, the ongoing submission of project contracts will be reviewed, and a copy of the Federal Lands Permit and Monitoring Reporting Program will be provided to contractors and grazing permittees (as applicable), and complied with.</p>

11. SIGNATURE / CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to ensure that qualified personnel property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment. Additionally, I certify that all provisions of the Order and Monitoring and Reporting Program will be complied with.

Applicant Signature

Date

Printed Name

Please submit this signed, complete NOI to northcoast@waterboards.ca.gov and copy the appropriate Administrative Unit's North Coast Water Board Federal Lands Permit liaison.

For North Coast Water Board Staff Use Only

<i>Date NOI Received:</i>	<i>Date Review Needed By:</i>	<i>Cat. B Activities:</i>	<i>WARP Activities (Y/N):</i>	<i>CWIQS ID:</i>