

Attachment E

Order No. R1-2023-0034

Application for 401 General Water Quality Certification/Waiver of Waste Discharge Requirements for Category B Activities Conducted Under the 5C Program

The following application must be submitted to the Regional Water Quality Control Board for projects with Category B activities that require Water Quality Certification and/or Waiver of Waste Discharge Requirements. Submit this application and the appropriate documentation by email to: northcoast@waterboards.ca.gov.

Mail a check payable to the State Water Resources Control Board, for the current Base Fee¹ plus additional Annual Fees, if applicable, as required according to the CCR 23 Section 2200 (a)(2) Fee Schedule, to:

North Coast Regional Water Quality Control Board
5550 Skylane Blvd., Suite A
Santa Rosa, CA 95403 Attn:
5C Program

For Internal Office Use Only

WDID#

Check #

\$

¹ A current Excel spreadsheet fee calculator can be found on the [North Coast Regional Water Board's website](https://www.waterboards.ca.gov/northcoast/water_issues/programs/water_quality_certification/)
(https://www.waterboards.ca.gov/northcoast/water_issues/programs/water_quality_certification/)

SECTION ONE – Applicant Information & Agent Authorization

Important Note! The applicant listed shall be the party responsible for compliance with the Clean Water Act, California Water Code, Basin Plan, and 401 Certification Conditions and is typically the property/facility owner. The authorized agent is the individual or team that is authorized to provide information to the Regional Water Board on behalf of the applicant (responsible party).

APPLICANT/PROPERTY OWNER(S) NAME	AUTHORIZED AGENT NAME AND TITLE (an agent is not required)
APPLICANT/PROPERTY OWNER(S) MAILING ADDRESS	AUTHORIZED AGENT MAILING ADDRESS
APPLICANT/PROPERTY OWNER(S) PHONE AND FAX NUMBERS	AUTHORIZED AGENT PHONE AND FAX NUMBERS
APPLICANT/PROPERTY OWNER(S) EMAIL	AUTHORIZED AGENT EMAIL

STATEMENT OF AUTHORIZATION (Required when applicant is designating an authorized agent)

I hereby authorize _____ to act on 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 or agent is also required on page 11.**

PRINT NAME OF APPLICANT (Not the Authorized Agent)

SIGNATURE OF APPLICANT (Not the Authorized Agent)

DATE

SECTION TWO – Project Application Information

Please refer to Attachment 1 - Project Plan Checklist at the end of this application for guidance and attach additional supporting documentation as necessary. When attaching supporting documentation the pertinent information shall be clearly identified by corresponding tabs, page numbers, etc., such that pertinent information is easily located. Please do not indicate “see attached” without identifying the attached document and the specific location within the document. Supplying detailed information will aid the review process; however, a complete application for water quality certification need not contain unnecessarily duplicative information. Applications containing multiple descriptions with conflicting data or other conflicting information will delay processing and may result in denial without prejudice. Including an electronic copy of the required information may reduce the review process time.

PROJECT NAME OR TITLE

PROJECT STREET ADDRESS (if applicable) **PROJECT LOCATION** (attach a site location map)

COUNTY

CITY/TOWN (nearest)

CITY/STATE/ZIP (or nearest city/town) **LATITUDE** (Decimal Degrees)

LONGITUDE (Decimal Degrees)

ASSESSORS PARCEL NUMBER(S) **SECTION, TOWNSHIP, RANGE, USGS QUADRANGLE MAP** (optional information)

DIRECTIONS TO THE SITE

PROJECT PURPOSE AND FINAL GOAL OF ENTIRE ACTIVITY See Attachment 1 – Project Plan Checklist at the end of this application for guidance. Attach additional information as necessary.

PROJECT DESCRIPTION See Attachment 1 - Project Plan Checklist at the end of this application for guidance. Provide a full, technically accurate description of the entire activity and associated environmental impacts. Please do not indicate “see attached” without identifying the attached document and the specific location within the document. Attach additional pages as necessary.

PROPOSED START AND END DATES

ESTIMATED DURATION

Will any project activity take place during the wet season months of October 15 through May 15?

YES NO

If YES, please discuss the proposed winterization strategies on Page 6, Avoidance of Indirect Impacts.

SECTION THREE – Additional Documentation Required (CCR Title 23, Section 3855)

Provide copies of any final and signed federal, state, and local licenses, permits, and agreements (or copies of the draft documents, if not finalized) that will be required for any construction, operation, maintenance, or other actions associated with the activity. If no final or draft document is available, a list of all remaining agency regulatory approvals being sought shall be included.

FEDERAL PERMIT(S) OR COMPLETED FEDERAL APPLICATIONS

U.S. Army Corps of Engineers - Staff Contact Information:

Name

Phone Number

E-mail

☐

Individual Permit

☐

Nationwide Permit Number

☐

Non-Reporting or

☐

Reporting

☐

Regional General Permit/Number

U.S. Fish and Wildlife Service - Staff Contact Information:

Name

Phone Number

E-mail

☐

Biological Assessment

☐

Biological Opinion

U.S. National Marine Fisheries Service - Staff Contact Information:

Name

Phone Number

E-mail

☐

Biological Assessment

☐

Biological Opinion

STATE PERMIT(S) OR COMPLETED STATE APPLICATION A copy of either of these must be submitted with this application 1) applied for or approved Lake or Streambed Alteration Agreement (LSA 1600-1608), or 2) Coastal Development Permit

STATE PERMIT TITLE

FILE DATE

FILE NUMBER

STATE PERMIT TITLE

FILE DATE

FILE NUMBER

LOCAL PERMIT(S) (applied for or approved, i.e. grading permit, building permit)

PERMIT TITLE

FILE DATE

FILE NUMBER

CALIFORNIA ENVIRONMENTAL QUALITY ACT COMPLIANCE This information is provided below. Applicants do not need to fill in this section.

TYPE OF CEQA DOCUMENT: Mitigated Negative Declaration

LEAD AGENCY: North Coast Regional Water Quality Control Board

STATE CLEARING HOUSE NUMBER: 2018012054

STATUS: Complete

CUMULATIVE IMPACTS List and describe other projects implemented within the past 5 years or planned within the next five years that are related to the proposed project, or that may impact the same watershed. Attach additional pages as necessary.

PROJECT NAME	DESCRIPTION	DATE IMPLEMENTED/PLANNED

SECTION Four – Affected Waters and Mitigation

Please refer to the provided Project Plan Checklist for guidance and attach additional supporting documentation as necessary. Supplying detailed information will aid in expediting the review process.

WETLAND DELINEATION INFORMATION

NAME OF PERSON DELINEATING EXTENT OF WETLANDS

DATE(S) OF WETLAND DELINEATION

TITLE

DATE OF WETLAND VERIFICATION BY U.S. ARMY CORPS

AFFILIATION

If a wetland delineation has been verified by the U.S. Army Corps, please submit the verification letter as well as a verified wetland delineation map. If the Corps did not assume jurisdiction over the wetlands present, please submit the denial letter.

PROJECT HYDROLOGIC INFORMATION²

Receiving Water(s)	Hydrologic Unit(s)	Water Body Type(s)

DESIGNATED BENEFICIAL USES³ Please check all that apply, add any additional ones if needed.

- | | | | | | |
|-------------------------------|-------------------------------|-------------------------------|--------------------------------|--------------------------------|-------------------------------|
| ☐ AGR | ☐ CUL | ☐ GWR | ☐ NAV | ☐ REC-2 | ☐ WET |
| ☐ AQUA | ☐ EST | ☐ IND | ☐ POW | ☐ SAL | ☐ WILD |
| ☐ ASBS | ☐ FISH | ☐ MAR | ☐ PRO | ☐ SHELL | ☐ WQE |
| ☐ COLD | ☐ FLD | ☐ MIGR | ☐ RARE | ☐ SPWN | |
| ☐ COMM | ☐ FRSH | ☐ MUN | ☐ REC-1 | ☐ WARM | |

² [Hydrologic Unit information](https://www.waterboards.ca.gov/northcoast/water_issues/programs/basin_plan/180710/BPMap.pdf)

(https://www.waterboards.ca.gov/northcoast/water_issues/programs/basin_plan/180710/BPMap.pdf)

³ [Beneficial Uses information](http://www.waterboards.ca.gov/northcoast/water_issues/programs/basin_plan/083105-bp/03_bu.pdf)

(http://www.waterboards.ca.gov/northcoast/water_issues/programs/basin_plan/083105-bp/03_bu.pdf) and [Basin Plan Documents](https://www.waterboards.ca.gov/northcoast/water_issues/programs/basin_plan/basin_plan_documents/)

(https://www.waterboards.ca.gov/northcoast/water_issues/programs/basin_plan/basin_plan_documents/)

POTENTIAL FOR IMPACTS TO THREATENED AND ENDANGERED SPECIES

(Attach all Biological Assessments, Surveys, Formal Consultation Determination letters,
and Mitigation Proposals as necessary.)

SPECIES AND/OR HABITAT	BIOLOGICAL ASSESSMENT (Y/N)	SURVEY CONDUCTED (Y/N)	DATES OF SURVEY CONDUCTED

TYPE OF WATERBODY (i.e. stream, wetland, ephemeral drainage)	FILL/EXCAVATION VOLUME AND TYPE (cu.yds.)	FILL/EXCAVATION SURFACE AREA (sq.ft./acres)	FILL/EXCAVATION LENGTH (linear ft.)	VEGETATION REMOVAL (linear ft./sq.ft.)	TYPE OF IMPACT (Temporary or Permanent)
Waters of the U.S.⁴					
☐ Wetland					
☐ Streambed (OHWM and below)					
☐ Lake/Reservoir					
☐ Ocean/Estuary/Bay					
☐ Other Type:					
Sub-total Waters of the U.S.					
Waters of the State⁵					
☐ Riparian					
☐ Stream channel/bank (Above OHWM)					
☐ Vernal Pool					
☐ Spring/Seep/Headwaters					
☐ Other Type:					
Sub-total Waters of the State					
Total Waters of U.S. and State					

⁴ Any impacts to Waters of the State that also meet the definition of Waters of the U.S. should be included under this section.

⁵ This section should only include impacts to Waters of the State that are not considered to be Waters of the U.S. Do not include impacts to Waters of the State that also meet the definition of Waters of the U.S. Doing so will result in impacts being double-counted and may result in incorrect and higher initial fee calculations.

EXAMPLE:

TYPE OF WATERBODY (i.e. stream, wetland, ephemeral drainage)	FILL/EXCAVATION VOLUME AND TYPE (cu.yds.)	FILL/EXCAVATION SURFACE AREA (sq.ft./acres)	FILL/EXCAVATION LENGTH (linear ft.)	VEGETATION REMOVAL (linear ft./sq.ft.)	TYPE OF IMPACT (Temporary or Permanent)
<i>Waters of the U.S</i>					
☐ <i>Streambed (below OHWM)</i>	<i>15 cubic yards of rip rap</i>	<i>0.001 acres (43.56 sq. ft.)</i>	<i>15 linear ft.</i>		<i>Permanent</i>
<i>Waters of the State</i>					
☐ <i>Riparian Area</i>				<i>465 linear ft./4,650 sq.ft.</i>	<i>Temporary</i>
☐ <i>Streambank (above OHWM)</i>					
<i>IMAPCT TOTALS</i>	<i>245 cubic yards</i>	<i>0036 acres (1,537 sq.ft.)</i>	<i>15 linear ft.</i>	<i>465 linear ft./4,650 sq.ft.</i>	

WATER QUALITY IMPACT DESCRIPTION

Report the nature and extent of temporary and permanent impacts to waters of the U.S. and/or State, such as turbidity, settleable matter, other pollutants, and beneficial uses associated with the proposed project. Attach a map that clearly depicts the anticipated area of direct impact and indirect disturbances.

AVOIDANCE OF DIRECT IMPACTS (Attach additional information if necessary)

Describe the efforts to **avoid** and **minimize direct impacts** to waters of the U.S. and State pursuant to Title 40 CFR Part 230 Section 404 (b)(1). See checklist for guidance. Attach additional pages as necessary.

ALTERNATIVES ANALYSIS

Has an Alternatives Analysis been prepared? YES NO If YES, please submit the appropriate documentation.

AVOIDANCE OF INDIRECT IMPACTS (Attach additional information if necessary)

(1) Describe efforts to avoid and minimize potential indirect impacts to waters of the U.S. and state which might affect water quality.

(2) Describe the methods proposed for erosion control and re-vegetation proposals, including winterization strategies to stabilize all bare soils.

(3) Submit a map indicating the approximate locations and area of soil, land, and vegetation disturbance and proposed best management practices.

(4) Describe the methods proposed to reduce sources of pollutants such as petroleum hydrocarbons, oil and grease, fertilizers, pesticides, sediment, etc., from entering the water system

SECTION FIVE – Low Impact Development

Order No. R1-2023-0034 does not authorize new road or road maintenance yard construction. This section is not applicable to projects done under Order No. R1-2023-0034.

SECTION SIX – Application Signature

Application is hereby made for a permit or permits to authorize the work described in this application. I certify, under penalty of perjury, that this application is complete and accurate to the best of my knowledge. I further certify that I possess the authority to undertake the work described herein or am acting as the duly authorized agent of the applicant. In addition, I certify property owner responsibility and liability for compliance with permit conditions issued for this project for compliance with any future authorization or amendments thereto.

PRINT NAME AND TITLE OF APPLICANT (OR AGENT)

SIGNATURE OF APPLICANT (OR AGENT)

DATE

Attachment 1 - Project Plan Checklist

A detailed project plan is required with every application. Clarification of information may be requested by Regional Water Quality Control Board (Regional Water Board) staff during application review. This checklist is provided to aid applicants in providing a thorough project plan. Not all items on the checklist apply to each and every project, rather they are to be used as general guidelines for required information to be included. In addition, there may be items not covered on this checklist that may be requested on a project by project basis.

Project Description

- ☐ Project Description
- ☐ Summary of overall project area (i.e., housing subdivision, highway widening)
 - Size and description of project area; type(s) of receiving water body(ies); brief list/description of applicant's previous and future projects related to the proposed activity or that may impact the same receiving water body(ies)
- ☐ Responsible Parties
 - Names and phone numbers of anyone participating in the project
- ☐ Jurisdictional Waters to be impacted
 - Include a detailed site plan clearly indicating proposed impacts and mitigation site areas, including acreages
- ☐ Type(s) of water body, flow duration (i.e. intermittent/perennial), inundation period, functions and values
- ☐ Location and size of project area
- ☐ Include site map and regional map of project location
- ☐ Species present within project site and/or upstream/downstream
- ☐ Threatened or endangered species present
- ☐ Existing functions, values, and condition of resources
 - Physical, hydrologic, and biological attributes, substrate composition and condition, complexity, effective shade, canopy cover,
- ☐ Current conditions at the site (mostly natural, degraded, heavily impacted)
- ☐ Construction methods to be used
- ☐ Adverse impacts
 - Include whether the adverse impacts will be temporary or permanent, and include amount of area to be affected (acres or linear feet)
- ☐ Schedule of construction activities
 - Include start and end dates for proposed activities
- ☐ Stockpile summary

- Include amount of stockpile and proposed areas for storage
- ☐ Best management practices
 - Practices to be implemented to reduce potential water quality impacts during and after construction activities, aside from proposed mitigation activities
- ☐ Site dewatering
- ☐ Solid waste disposal for dredged or excess construction/demolition materials
- ☐ Mitigation and monitoring plans (refer to Stream, Riparian, and Wetland Mitigation Checklists)