

CITY OF BAINBRIDGE ISLAND

PROGRAMMATIC BUOY APPLICATION

FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE.
PENCIL WILL NOT BE ACCEPTED.



<p>DATE STAMP FOR CITY USE ONLY</p>	<p><u>TO BE FILLED OUT BY APPLICANT</u></p>
	<p>PROJECT NAME:</p> <hr/> <p>TAX ASSESSOR'S NUMBER: (IF UPLAND PROPERTY OWNER)</p> <hr/> <p>PROJECT STREET ADDRESS OR ACCESS STREET:</p> <hr/> <p>LATITUDE/LONGITUDE N ° ' " COORDINATES: W ° ' " </p>
	<p><u>FOR CITY USE ONLY</u></p>
	<p>FILE NUMBER:</p> <hr/> <p>PROJECT NUMBER:</p> <hr/> <p>DATE RECEIVED:</p> <hr/> <p>APPLICATION FEE:</p> <hr/> <p>TREASURER'S RECEIPT NUMBER:</p> <hr/>
<p>SUBMITTAL REQUIREMENTS</p>	
APPLICATION	<i>One original (which must contain an original signature) and one copy</i> must be provided. Whenever possible, originals must be <i>signed in blue</i> . Please identify the original document.
SUPPORTING DOCUMENTS	<i>One original (which must contain an original signature)</i> , where applicable, and <i>one copy</i> .
DRAWINGS	<i>Two copies</i> of the drawings, 11" x 17" or smaller must be provided.
SUBMITTING APPLICATIONS	Applications <i>are to be submitted in person by appointment</i> either by the owner or the owner's designated agent. Should an agent submit the application, a <i>notarized Owner/Agent Agreement</i> must accompany the application.
FEES	Please call the Department of Planning & Community Development for submittal fee information.
ATTACHED SUBMITTAL CHECKLIST	Please refer to attached Submittal Checklist for further information. NOTE: when submitting this application, please do not copy or include the Submittal Checklist sheets attached to the back of this application.
<p>APPLICATIONS WILL NOT BE ACCEPTED unless these basic requirements are met and the submittal packet is deemed counter complete.</p>	

DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
280 MADISON AVENUE NORTH • BAINBRIDGE ISLAND, WA • 98110-1812
PHONE: (206) 842-2552 • FAX: (206) 780-0955 • EMAIL: pcd@ci.bainbridge-isl.wa.us
www.ci.bainbridge-isl.wa.us

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A. GENERAL INFORMATION

1. Name of buoy owner : _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

2. Name of bedland/property owner: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

If the owner(s) of record as shown by the county assessor's office is (are) not the agent, the owner's (owners') signed and notarized authorization(s) must accompany this application.

3. Authorized agent: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

4. Driving directions to site and or description of site location: _____

5. Common water area name: Agate Passage – Blakely Harbor – Eagle Harbor – Fetcher Bay –
(Circle one) Madison Bay (includes Hidden Cove) -- Manzanita Bay -- Murden
Cove -- Port Madison -- Port Orchard or Puget Sound -- Rich
Passage -- Rolling Bay

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6. Legal description (or attach) if applicable: _____

7. Is the proposed buoy location within a mapped Aquatic Conservancy Shoreline Designation? (If yes, you may not apply for a buoy under this programmatic permit) yes no unknown

8. Is the proposed buoy location off shore from uplands mapped as Natural Shoreline Environment (If yes, you may not apply for a buoy under this programmatic permit) yes no unknown

9. Is the proposed buoy location landward of the construction limit line in Eagle Harbor or elsewhere no more than 200 feet from the line of extreme low water? yes no

10. What is the proposed length of line between the anchor and the buoy _____ ft. (See Cross-Sectional Worksheet)
(Note: not to exceed the water depth measured at extreme high tide, 14.5 MLLW plus a maximum of 20 % addition line for scope)
(Note: subsurface floats keep the anchor line off bottom during low tide cycles and should be placed 1/3 the distance from the anchor to the buoy)

11. Buoys are not to be closer than 20 yards to any legally pre-existing buoys, floats, or docks. Please identify any structures within 300 feet of the proposed buoy location and give the approximate distance and direction from buoy:

Type of Structure (ie: buoy, float or dock)	Distance in feet from proposed buoy location	General direction from proposed buoy

12. Are you the upland property owner? yes no

13. If you are the upland property owner, are you proposing to have more than one buoy? yes no

14. Have you applied for or obtained a license from the Washington Department of Natural Resources? yes no N/A
If so please provide your license # _____

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15. Have you submitted a JARPA (Joint Aquatic Resources Permit Application) to the Washington Department of Fish and Wildlife and the Army Corps of Engineers? yes no

16. Have you provided the Suquamish Tribe a copy of your proposed plan view with Latitude /Longitude coordinates? yes no (This is required prior to permit submittal)

17. Does the buoy swing circle encroach on neighboring tidelands? yes no

18. If you answered yes to question #17 you must provide an agreement from the neighboring or upland property owner allowing the buoy to swing over the property lines Attached N/A

19. What type of anchor will be used to secure the mooring buoy? Embedment (helical screw, duck bill, etc) Surface (Concrete Block, Danforth, etc)

Existing Anchor

20. If you are proposing a new surface style anchor, have you attached an aquatic vegetation dive survey? yes no N/A

21. A qualified diver/biologist is required to install a new embedment style anchor. Please provide the following information about the diver/biologist:

Name: () Phone number:

I hereby certify that I have read this application and know the same to be true and correct.

*Signature of owner or authorized agent

Date

Printed

**If signatory is not the owner of record, the attached "Owner/Agent Agreement" must be signed and notarized*

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SUBMITTAL REQUIREMENTS FOR PROGRAMMATIC BUOY

General Information:

Three types of illustrations are needed to properly depict the proposed activity: vicinity map, plan view, and cross-sectional view. Drawings to scale should be prepared using clear printing, black ink, and the fewest number of sheets possible. Include the scale. The importance of clear, accurate drawings cannot be overstated. At a minimum, drawings **must contain the following information**. If you have questions completing the drawings, please call our office.

1. Vicinity Map

A copy of a county or city road map, or an U.S. Geological Survey topographic map may be used. Include:

- a. north arrow;
- b. name of water body;
- c. location of the proposed buoy location (indicate with a circle, arrow, X, or similar symbol);
- d. provide latitude and longitude of the site to the nearest second; and
- e. provide directions to the site.

2. Plan View

This drawing illustrates the proposed project area as if you were looking down at the site from overhead (See attached sample site plan).

Include:

- a. north arrow, scale;
- b. name of water body and direction of water flow;
- c. location of existing shoreline;
- d. dimensions of the buoy distance from property lines and other structures, such as buoys, floats and docks within 300 feet
- e. indicate adjoining property ownership;
- f. indicate types and location of aquatic vegetation

3. Cross-sectional View

Please fill out the Programmatic Buoys SSDP Cross-Sectional View Worksheet. (Attached)

Owner/Agent Agreement

The undersigned is (are) the owner(s) of record of the property identified by the Kitsap County Assessor's account number _____ located at _____ Bainbridge Island, Washington. The undersigned hereby gives (give) consent and approval to

to act on his/her (their) behalf as his/her (their) agent to proceed with an application for (please check all items that apply):

- preapplication conference
- planning permits
- construction permits (i.e. building, water/sewer availability, right-of-way, etc)

on the property referenced herein. This agreement authorizes the agent to act on the owner's behalf for the above checked applications through (date or specific phase) _____.

Owner of record

Date

Owner of record

Date

STATE OF WASHINGTON)
) SS.
COUNTY OF KITSAP)

On this _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared:

_____ to me known as the individual(s) described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument, as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

Notary Public in and for the State of Washington

Residing at _____

My appointment expires: _____

Programmatic Buoy Permit Conditions:

1. Recreational use buoys may only be allowed under this programmatic buoy SSDP if the applicants complete the programmatic buoy application, cross-sectional view worksheet, prepare a site plan that is consistent with the sample programmatic site plan and install the buoy consistent with the programmatic design.
2. No buoys shall be issued under this programmatic permit if they are to be located off shore from uplands mapped as Natural Shoreline Environment.
3. No buoys shall be issued under this programmatic permit if they are to be located in locations that are mapped or meet the definition of being an Aquatic Conservancy Shoreline Designation.
4. All programmatic buoys shall be located off shore no farther than the construction limit line in Eagle Harbor, and elsewhere no more than 200 feet from the line of extreme low tide, the -3 fathom depth contour (-18 feet at mean lower low water), or the line of navigation, whichever is closest to shore.
5. No programmatic buoy shall be a substantial obstruction to navigation.
6. No programmatic buoy shall be placed within 20 yards of a legally pre-existing buoy, float or dock.
7. In order to minimize adverse impacts on marine vegetation, no surface style anchor shall be deployed without a dive survey by a qualified diver/biologist.
8. In order to protect shellfish beds, new buoys shall not be permitted where the buoy density would exceed one buoy per 100 linear feet.
9. Prior to buoy placement applicant shall obtain a lease or license from the Department of Natural Resources and a Hydraulic Project Approval (HPA) from the Washington Department of Fish and Wildlife. A copy of the lease/license and HPA shall be provided to the City once obtained. (If the buoy being permitted is existing, documentation of a lease or license from the Department of Natural Resources shall be provided to the City once obtained.)
10. If the buoy being permitted is existing and modifications to the materials are necessary to bring it into compliance with the programmatic criteria then the modifications to the buoy system must be made and confirmed by site inspection by the City within 6 months of issuance of the individual buoy permit.
11. A qualified aquatic biologist is a person recognized by the Washington Department of Fish and Wildlife, and should be able to identify Washington State aquatic vegetation.
12. At the time of submittal for a programmatic buoy application for a new buoy or to authorize a buoy that has been placed since 1996, the applicant must provide evidence that the Suquamish Tribe has been notified regarding the proposed location of the buoy. Notification shall include at a minimum a plan view of the buoy location with GPS Location.

Attn: Alison O'Sullivan
Suquamish Tribe
P.O. Box 498
Suquamish, WA 98392
Ph (360) 394-8447 Fax: 360 598-4666
e-mail aosullivan@suquamish.nsn.us

(Note: If you e-mail information to the tribe it should also be sent by fax or regular mail)

Tideland Agreement

The undersigned is (are) the owner(s) of record of the property identified by the Kitsap County Assessor's account number _____, located at _____, Bainbridge Island, Washington. The undersigned hereby gives (give) consent and approval to _____ to allow his/her (their) buoy/boat swing over my/our tidelands.

Owner of record *Date* *Owner of record* *Date*

STATE OF WASHINGTON)
) SS.
COUNTY OF KITSAP)

On this _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared:

to me known as the individual(s) described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument, as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

Notary Public in and for the State of Washington

Residing at _____

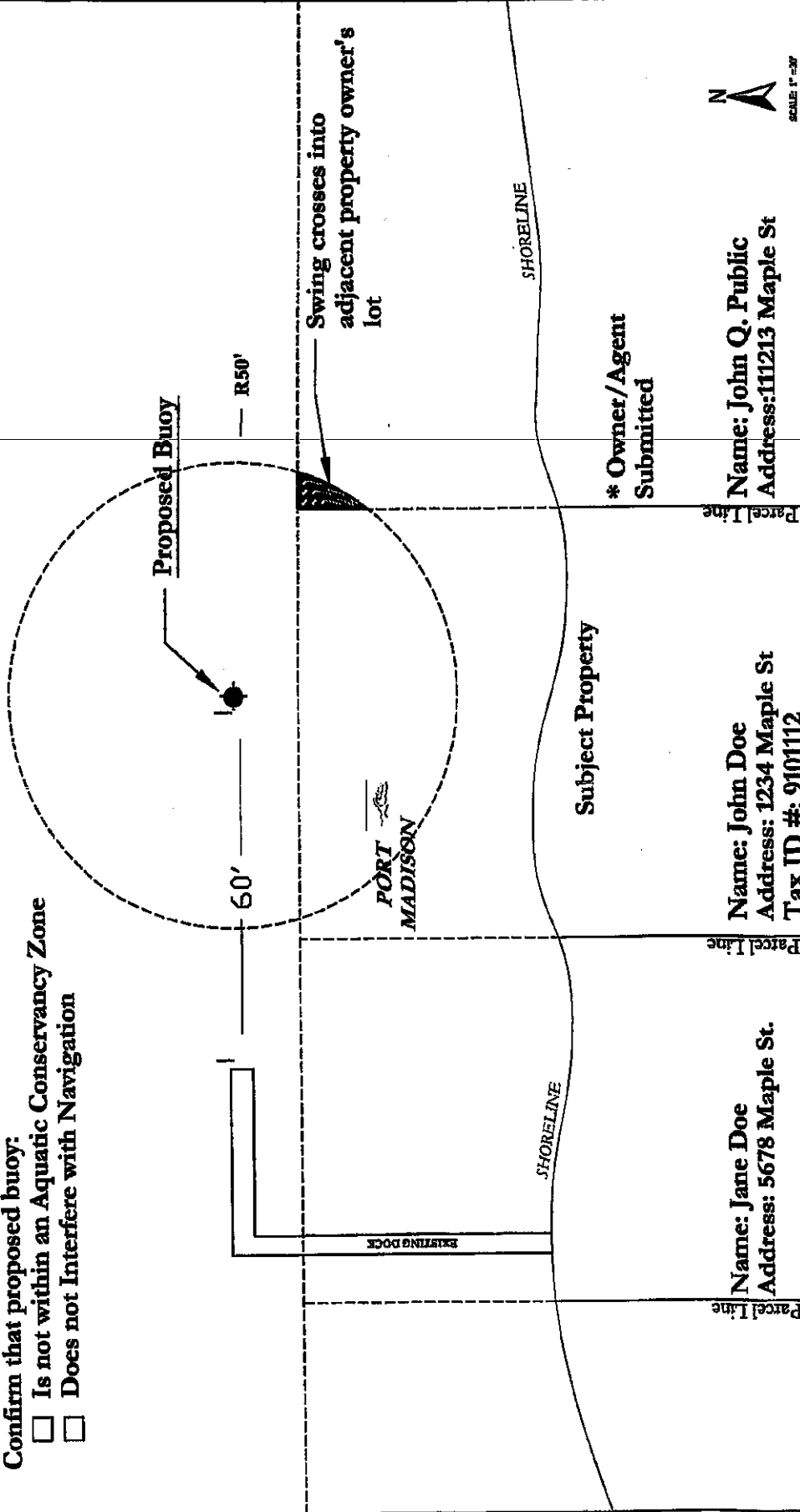
My appointment expires: _____

Programmatic Buoys SSDP Plan View Sample

GPS Location $47^{\circ} 37' 08.35'' N$ by $122^{\circ} 31' 04.66'' W$

Confirm that proposed buoy:

- Is not within an Aquatic Conservancy Zone
- Does not Interfere with Navigation



* Owner/Agent Submitted

Name: John Q. Public
Address: 11213 Maple St

Name: John Doe
Address: 1234 Maple St
Tax ID #: 910112

Name: Jane Doe
Address: 5678 Maple St.





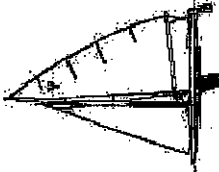
City of
Bainbridge
Island

Programmatic Buoys SSDP # 15435 Cross-Sectional View Worksheet

GPS Location: _____° _____' _____" N by _____° _____' _____" W
(Subject to verification by the City)

Owner: _____
DNR Lease/License # _____

STEP 1



Buoy

Reflector
Color: White
Banding Color: Blue
Type of Line?

Bottom Depth = _____ feet MLLW
(At mean low, low water or tide)
(Minimum Depth = -9 feet MLLW
Maximum Depth = -18 feet MLLW)

Surface

Mid-Line Float

Located 1/3 of Line Length or
Extreme Low Water (ELW),
whichever is deeper.

No Eelgrass or
Macroalgae
Present

Eelgrass or
Macroalgae
Present

Ecology Block
Anchor option
with dive survey

Embedment
Anchor option
without dive
survey

STEP 4

Bottom Depth _____ + 14.5' = _____
Extreme High Water (DEHT) _____
Depth Extreme High Tide (DEHT) _____

DEHT _____ x _____ = _____
.20(MAX) _____ Scope _____

DEHT _____ + _____ = _____
Scope _____
Length of Line (L) _____ *See Question #10*

Bottom Depth (BD) less extreme
low water (-4.5') = depth extreme low tide (DELT)

-BD _____ - 4.5' = _____
DELT _____

$$\text{Swing} = \sqrt{(L^2 - (\text{DELT})^2)} - (\text{DELT})$$

_____ = _____ Swing
_____ + _____ Bowline
_____ + _____ Vessel Length
_____ = _____ * Total Swing

Check One *

*See Question #19

* Show Total Swing on Plan View

Washington Department of Natural Resources Recreational Mooring Buoy Forms:

1. If you are the upland property owner adjacent to where the buoy will be placed then just fill out the **Mooring Buoy Registration card.**
2. If you are not an adjacent upland property owner and are placing a buoy on state owned aquatic lands then you will need to fill out the **Mooring Buoy/Boatlift License Application.**

These forms are not submitted to the City but are sent directly to DNR at the following address:

Department of Natural Resources
Shoreline District
Aquatic Region
950 Farman Avenue N
Enumclaw, WA 9802209282
(360) 825-1631

RESIDENTIAL PROPERTY OWNER
Mooring Buoy
Registration

To register a recreational mooring buoy, please fill out as much of this card as possible, and send it to your DNR Aquatic District (see brochure back). If you have questions, call the Aquatic District Land Manager.

BUOY OWNER / RESIDENTIAL OWNER

Last Name _____
First Name _____
Address _____

City _____
State _____ Zip Code _____
Parcel Number _____
Telephone _____ Email _____

BUOY LOCATION

- Use NAD 83 Coordinates
- Enter Coordinates in Decimal Degrees

North Latitude _____
West Longitude _____
Legal Description (TOWNSHIP, RANGE, SECTION)

County _____
Water Body _____
Length of Boat _____
Signature _____ Date _____

Place
Stamp
Here

Washington State Department of Natural Resources



WASHINGTON STATE DEPARTMENT OF
Natural Resources
 Doug Sutherland - Commissioner of Public Lands

MOORING BUOY/BOATLIFT LICENSE APPLICATION

Enclose a \$25.00 non-refundable application-processing fee with the application. Any agency, political subdivision or municipal corporation of this state, or the United States is exempt from this \$25.00 application fee (WAC 332-10-190). The Department of Natural Resources (DNR) will review this application upon receipt and notify you in writing if the application is accepted for further review. DNR may reject this application at any time before authorization.

Please send the completed application form to your region land manager at:

Department of Natural Resources –OR Orca Straits District Aquatic Region 919 N Township Street Sedro-Woolley, WA 98284-9384 360-856-3500	Department of Natural Resources –OR Shoreline District Aquatic Region 950 Farman Avenue N Enumclaw, WA 98022-9282 360-825-1631	Department of Natural Resources Rivers District Aquatic Region 601 Bond Road; PO Box 280 Castle Rock, WA 98611-0280 360-577-2025
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1. Name: _____ Date: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Telephone Number: _____ Home: _____ Work: _____

2. Which of the following applies to Applicant (check one):

Washington corporation -OR- Partnership -OR- Martial Community -OR- Single Individual – OR
 (Other)

3. Check if Upland Parcel owner address is the same as above. If not, fill in below:

Upland Parcel Owner Name:

Address: _____ City: _____ State: _____ Zip: _____
 Telephone Number: Home: _____ Work: _____
 List or attach the required information:

4. Legal Description: Government Lot(s) _____ in Section _____ Township _____ N. Range _____ East – West W.M. _____

5. Latitude: _____ Longitude: _____

6. Global Positioning System (GPS) location if known:

7. Depth of Water at buoy/boatlift location:

8. Length of Vessel: _____ Vessel Registration Number: _____

9. Attach copies of any regulatory permits or waivers required. Although this may not be a complete list for your area, note the ones needed and attached:

- a. WA Department of Fish & Wildlife
- b. County Shoreline Permit (s)
- c. U.S. Army Corp of Engineers
- d. WA Department of Ecology
- e. Other

Land Manager: New Application _____ Renewal Application _____
 Land Manager: Initials _____ Aquatic Program Manager Initials _____

Support: Application Fee Received _____ Date _____

Land Records: New Application Number _____
 Land Records: Trust _____ County _____ AQR Plate No. _____

INFORMATION REQUIREMENTS FOR A MOORING BUOY/BOATLIFT LICENSE

Include all the requirements outlined with your application. Submit a two page Exhibit A map no longer than 18 inches x 24 inches. On the first page, provide a vicinity map on a USGS 7.5 minute quadrangle map. On the second page, provide a drawing with the details for question 5 at a scale of 1 inch = 200 feet or larger.

1. Is there a mooring buoy or boatlift currently at this site? Yes No

2. If yes, does the mooring buoy or boatlift belong to the applicant? Yes No

If no, who does the buoy or boatlift belong to?

Name:

Address:

Telephone:

3. If yes, is the mooring buoy or boatlift authorized by DNR? Yes No

4. If yes, what is the DNR lease number?

5. Mark the position of the buoy or boatlift either by a differentially corrected Global Positioning System (GPS) measurement or by conventional surveying methods. Mark the position in relation to its anchor. The information must be accurate to (+ or -) 10 feet. A licensed surveyor must provide this information, or you must document it as follows:

A. List a coordinate of the anchor position with a state plane grid coordinate or a latitude and longitude.

B. Detail the survey method used to mark the position of the buoy or boatlift.

C. List the land stations used to fix the position. You must have a minimum of two fixed stations and a closed traverse, or differentially corrected GPS measurements to determine the (+ or -) 10 feet requirement, and verify azimuth.

D. List the time and date you performed the work.

E. List the tidal correction and the depth to the anchor of the buoy or boatlift, and how you determined it.

F. Provide the distance from the appropriate line of state ownership, for example, mean high tide, extreme low tide, the line of ordinary high water, or the line of navigability (fresh water).

G. List the distance from other mooring anchors, structures or hazards in the area.

H. Show a full circle on the exhibit that should be free from all obstacles including buoys, docks or other hazards. The circle radius of the authorized area for a vessel 30 feet or less is 130 feet. The radius for a vessel from 30 to 60 feet is 175 feet.

EXHIBIT B

Plan of Operations and Maintenance For a Mooring Buoy and/or Boatlift license

GENERAL

The buoy and/or boat lift must meet or exceed all applicable federal, state and local regulations. DNR may revoke this license if a buoy or boatlift is not in good working condition or poses a hazard to other vessels, structures, or state-owned aquatic land.

VISIBILITY AND IDENTIFICATION

1. The buoy and/or boatlift must float at least 18 inches above the surface of the water.
2. The buoy and/or boatlift must be marked with the DNR license authorization number. The numbers must be at least 3 inches tall and visible from 20 feet.

BUOY AND BOATLIFT DESIGN

Install a mid-line float on:

- all freshwater buoys or boatlifts, and
- all marine (saltwater) buoys or boatlifts located in depths of less than -30 feet Mean Low Low Water (MLLW)

The mid-line float must be:

- sufficient to hold the tether line off the bottom, and
- located at a distance from the anchor equal to 1/3 the maximum water depth at extreme high tide.

ANCHOR DESIGN

1. The anchor must be sufficient to hold the vessel in all weather.
2. The Licensee bears responsibility to ensure that the anchor does not move.
3. If the anchor moves offsite, DNR may terminate this license and require removal of the buoy, boatlift and anchor.
3. DNR prefers anchor systems which minimize impacts to the bottom and does not allow "dampening anchor" systems.

BOATLIFTS

The owner shall inspect boatlifts annually and maintain them in good working condition. The lifts may not be used:

- To house vessels during refueling.
- To wash vessels.
- For vessel maintenance of any kind.
- To store fuels or oils that may enter onto state-owned aquatic lands.

1. Check the type of system used to secure the boatlift. It is attached to a:

Recreational Dock Bulkhead Buoy Anchor Freestanding Other

2. The boatlift is made of:

Steel Aluminum Polyethylene Wood Other

3. The boatlift will remain in place year round Yes No

3. If no, it will be removed from to

MAINTENANCE PLAN

Describe in detail the maintenance plan for the buoy and / or boatlift and anchoring system:

Army Corps of Engineers and Washington State Department of Fish and Wildlife Recreational Mooring Buoy Forms:

Both the Army Corps of Engineers and the Department of Fish and Wildlife use the **JARPA (Joint Aquatic Resource Permit Application)**.

The Army Corps of Engineers also requires recreational mooring buoy applicants to fill out the **Programmatic ESA Consultation form**.

These forms are not submitted to the City but are sent directly to the Army Corps of Engineers and the WDFW at the following addresses:

Washington Department of Fish and Wildlife
Region 6
48 Devonshire Road
Montesano, WA 98563-9618

U.S. Army Corps of Engineers
Seattle District
Regulatory Branch
Post Office Box 3755
Seattle, WA 98124-2255



2010

WASHINGTON STATE

Joint Aquatic Resources Permit Application (JARPA) Form¹

USE BLACK OR BLUE INK TO ENTER ANSWERS IN WHITE SPACES BELOW.



AGENCY USE ONLY

Date received: _____

Agency reference #: _____

Tax Parcel #(s): _____

Part 1--Project Identification

1. Project Name (A name for your project that you create. Examples: Smith's Dock or Seabrook Lane Development) [help]²

Part 2--Applicant

The person or organization responsible for the project. [help]

2a. Name (Last, First, Middle) and Organization (if applicable)			
2b. Mailing Address (Street or PO Box)			
2c. City, State, Zip			
2d. Phone (1)	2e. Phone (2)	2f. Fax	2g. E-mail
()	()	()	

Part 3--Authorized Agent or Contact

Person authorized to represent the applicant about the project. (Note: Authorized agent(s) must sign 11b. of this application.) [help]

3a. Name (Last, First, Middle) and Organization (if applicable)
3b. Mailing Address (Street or PO Box)

¹Additional forms may be required for the following permits:

- If your project may qualify for Department of the Army authorization through a Regional General Permit (RGP), contact the U.S. Army Corps of Engineers for application information (206) 764-3495.
- If your project might affect species listed under the Endangered Species Act, you will need to fill out a Specific Project Information Form (SPIF) or prepare a Biological Evaluation. Forms can be found at http://www.nws.usace.army.mil/PublicMenu/Menu.cfm?sitename=REG&pagename=mainpage_ESA
- If you are applying for an Aquatic Resources Use Authorization you will need to fill out and submit an Application for Authorization to Use State-Owned Aquatic Lands form to DNR, which can be found at http://www.dnr.wa.gov/Publications/aqr_use_auth_app.doc
- Not all cities and counties accept the JARPA for their local Shoreline permits. If you think you will need a Shoreline permit, contact the appropriate city or county government to make sure they will accept the JARPA.

²To access an online JARPA form with [help] screens, go to

http://www.epermitting.wa.gov/site/alias_resourcecenter/jarpa_jarpa_form/9984/jarpa_form.aspx.

For other help, contact the Governor's Office of Regulatory Assistance at 1-800-917-0043 or help@ora.wa.gov.

3c. City, State, Zip			
3d. Phone (1)	3e. Phone (2)	3f. Fax	3g. E-mail
()	()	()	

Part 4–Property Owner(s)

Contact information for people or organizations owning the property(ies) where the project will occur. [\[help\]](#)

- Same as applicant. (Skip to Part 5.)
- Repair or maintenance activities on existing rights-of-way or easements. (Skip to Part 5.)
- There are multiple property owners. Complete the section below and fill out JARPA Attachment A for each additional property owner.

4a. Name (Last, First, Middle) and Organization (if applicable)			
4b. Mailing Address (Street or PO Box)			
4c. City, State, Zip			
4d. Phone (1)	4e. Phone (2)	4f. Fax	4g. E-mail
()	()	()	

Part 5–Project Location(s)

Identifying information about the property or properties where the project will occur. [\[help\]](#)

- There are multiple project locations (e.g., linear projects). Complete the section below and use JARPA Attachment B for each additional project location.

5a. Indicate the type of ownership of the property. (Check all that apply.) [help]
<input type="checkbox"/> State Owned Aquatic Land (If yes or maybe, contact the Department of Natural Resources (DNR) at (360) 902-1100) <input type="checkbox"/> Federal <input type="checkbox"/> Other publicly owned (state, county, city, special districts like schools, ports, etc.) <input type="checkbox"/> Tribal <input type="checkbox"/> Private
5b. Street Address (Cannot be a PO Box. If there is no address, provide other location information in 5p.) [help]
5c. City, State, Zip (If the project is not in a city or town, provide the name of the nearest city or town.) [help]
5d. County [help]

5e. Provide the section, township, and range for the project location. [help]

¼ Section	Section	Township	Range

5f. Provide the latitude and longitude of the project location. [help]

- Example: 47.03922 N lat. / -122.89142 W long. (NAD 83)

--

5g. List the tax parcel number(s) for the project location. [help]

- The local county assessor's office can provide this information.

--

5h. Contact information for all adjoining property owners. (If you need more space, use JARPA Attachment C.) [help]

Name	Mailing Address	Tax Parcel # (If known)

5i. List all wetlands on or adjacent to the project location. [help]

--

5j. List all waterbodies (other than wetlands) on or adjacent to the project location. [help]

--

5k. Is any part of the project area within a 100-year flood plain? [help]

- Yes No Don't know

5l. Briefly describe the vegetation and habitat conditions on the property. [help]

--

5m. Describe how the property is currently used. [help]

5n. Describe how the adjacent properties are currently used. [help]

5o. Describe the structures (above and below ground) on the property, including their purpose(s). [help]

5p. Provide driving directions from the closest highway to the project location, and attach a map. [help]

Part 6—Project Description

6a. Summarize the overall project. You can provide more detail in 6d. [help]

6b. Indicate the project category. (Check all that apply) [help]

- Commercial
 Residential
 Institutional
 Transportation
 Recreational
 Maintenance
 Environmental Enhancement

6c. Indicate the major elements of your project. (Check all that apply) [help]

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Aquaculture | <input type="checkbox"/> Culvert | <input type="checkbox"/> Float | <input type="checkbox"/> Road |
| <input type="checkbox"/> Bank Stabilization | <input type="checkbox"/> Dam / Weir | <input type="checkbox"/> Geotechnical Survey | <input type="checkbox"/> Scientific Measurement Device |
| <input type="checkbox"/> Boat House | <input type="checkbox"/> Dike / Levee / Jetty | <input type="checkbox"/> Land Clearing | <input type="checkbox"/> Stairs |
| <input type="checkbox"/> Boat Launch | <input type="checkbox"/> Ditch | <input type="checkbox"/> Marina / Moorage | <input type="checkbox"/> Stormwater facility |
| <input type="checkbox"/> Boat Lift | <input type="checkbox"/> Dock / Pier | <input type="checkbox"/> Mining | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Bridge | <input type="checkbox"/> Dredging | <input type="checkbox"/> Outfall Structure | <input type="checkbox"/> Utility Line |
| <input type="checkbox"/> Bulkhead | <input type="checkbox"/> Fence | <input type="checkbox"/> Piling | |
| <input type="checkbox"/> Buoy | <input type="checkbox"/> Ferry Terminal | <input type="checkbox"/> Retaining Wall (upland) | |
| <input type="checkbox"/> Channel Modification | <input type="checkbox"/> Fishway | | |

Other:

6d. Describe how you plan to construct each project element checked in 6c. Include specific construction methods and equipment to be used. [help]

- Identify where each element will occur in relation to the nearest waterbody.
- Indicate which activities are within the 100-year flood plain.

6e. What are the start and end dates for project construction? (month/year) [help]

- If the project will be constructed in phases or stages, use JARPA Attachment D to list the start and end dates of each phase or stage.

Start date: _____

End date: _____

See JARPA Attachment D

6f. Describe the purpose of the project and why you want or need to perform it. [help]
6g. Fair market value of the project, including materials, labor, machine rentals, etc. [help]
6h. Will any portion of the project receive federal funding? [help]
<ul style="list-style-type: none"> • If yes, list each agency providing funds.
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know

Part 7--Wetlands: Impacts and Mitigation

Check here if there are wetlands or wetland buffers on or adjacent to the project area.
 (If there are none, skip to Part 8.) [help]

7a. Describe how the project has been designed to avoid and minimize adverse impacts to wetlands. [help]
<input type="checkbox"/> Not applicable
7b. Will the project impact wetlands? [help]
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
7c. Will the project impact wetland buffers? [help]
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
7d. Has a wetland delineation report been prepared? [help]
<ul style="list-style-type: none"> • If yes, submit the report, including data sheets, with the JARPA package.
<input type="checkbox"/> Yes <input type="checkbox"/> No
7e. Have the wetlands been rated using the Western Washington or Eastern Washington Wetland Rating System? [help]
<ul style="list-style-type: none"> • If yes, submit the wetland rating forms and figures with the JARPA package.
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know

7f. Have you prepared a mitigation plan to compensate for any adverse impacts to wetlands? [\[help\]](#)

- If yes, submit the plan with the JARPA package and answer 7g.
- If No, or Not applicable, explain below why a mitigation plan should not be required.

Yes No Not applicable

7g. Summarize what the mitigation plan is meant to accomplish, and describe how a watershed approach was used to design the plan. [\[help\]](#)

7h. Use the table below to list the type and rating of each wetland impacted; the extent and duration of the impact; and the type and amount of mitigation proposed. Or if you are submitting a mitigation plan with a similar table, you can state (below) where we can find this information in the plan. [\[help\]](#)

Activity (fill, drain, excavate, flood, etc.)	Wetland Name ¹	Wetland type and rating category ²	Impact area (sq. ft. or Acres)	Duration of Impact ³	Proposed mitigation type ⁴	Wetland mitigation area (sq. ft. or acres)

¹ If no official name for the wetland exists, create a unique name (such as "Wetland 1"). The name should be consistent with other project documents, such as a wetland delineation report.

² Ecology wetland category based on current Western Washington or Eastern Washington Wetland Rating System. Provide the wetland rating forms with the JARPA package.

³ Indicate the days, months or years the wetland will be measurably impacted by the activity. Enter "permanent" if applicable.

⁴ Creation (C), Re-establishment/Rehabilitation (R), Enhancement (E), Preservation (P), Mitigation Bank/In-lieu fee (B)

Page number(s) for similar information in the mitigation plan, if available: _____

7i. For all filling activities identified in 7h., describe the source and nature of the fill material, the amount in cubic yards that will be used, and how and where it will be placed into the wetland. [\[help\]](#)

7j. For all excavating activities identified in 7h., describe the excavation method, type and amount of material in cubic yards you will remove, and where the material will be disposed. [\[help\]](#)

Part 8–Waterbodies (other than wetlands): Impacts and Mitigation

In Part 8, “waterbodies” refers to non-wetland waterbodies. (See Part 7 for information related to wetlands.) [\[help\]](#)

Check here if there are waterbodies on or adjacent to the project area. (If there are none, skip to Part 9.)

8a. Describe how the project is designed to avoid and minimize adverse impacts to the aquatic environment. [\[help\]](#)

Not applicable

8b. Will your project impact a waterbody or the area around a waterbody? [\[help\]](#)

Yes No

8c. Have you prepared a mitigation plan to compensate for the project's adverse impacts to non-wetland waterbodies? [\[help\]](#)

- If yes, submit the plan with the JARPA package and answer 8d.
- If No, or Not applicable, explain below why a mitigation plan should not be required.

Yes No Not applicable

8d. Summarize what the mitigation plan is meant to accomplish. Describe how a watershed approach was used to design the plan.

- If you already completed 7g., you do not need to restate your answer here. [\[help\]](#)

8e. Summarize impact(s) to each waterbody in the table below. [\[help\]](#)

Activity (clear, dredge, fill, pile drive, etc.)	Waterbody name ¹	Impact location ²	Duration of impact ³	Amount of material to be placed in or removed from waterbody	Area (sq. ft. or linear ft.) of waterbody directly affected

¹ If no official name for the waterbody exists, create a unique name (such as "Stream 1") The name should be consistent with other documents provided.

² Indicate whether the impact will occur in or adjacent to the waterbody. If adjacent, provide the distance between the impact and the waterbody and indicate whether the impact will occur within the 100-year flood plain.

³ Indicate the days, months or years the waterbody will be measurably impacted by the work. Enter "permanent" if applicable.

8f. For all activities identified in 8e., describe the source and nature of the fill material, amount (In cubic yards) you will use, and how and where it will be placed into the waterbody. [\[help\]](#)

8g. For all excavating or dredging activities identified in 8e., describe the method for excavating or dredging, type and amount of material you will remove, and where the material will be disposed. [\[help\]](#)

Part 9—Additional Information

Any additional information you can provide helps the reviewer(s) understand your project. Complete as much of this section as you can. It is ok if you cannot answer a question.

9a. If you have already worked with any government agencies on this project, list them below. [help]			
Agency Name	Contact Name	Phone	Most Recent Date of Contact
		()	
		()	
		()	
9b. Are any of the wetlands or waterbodies identified in Part 7 or Part 8 on the Washington Department of Ecology's 303(d) List? [help]			
<ul style="list-style-type: none"> • If yes, list the parameter(s) below. • If you don't know, use Washington Department of Ecology's Water Quality Assessment tools at: http://www.ecy.wa.gov/programs/wq/303d/. 			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
9c. What U.S. Geological Survey Hydrological Unit Code (HUC) is the project in? [help]			
<ul style="list-style-type: none"> • Go to http://cfpub.epa.gov/surf/locate/index.cfm to help identify the HUC. 			
9d. What Water Resource Inventory Area Number (WRIA #) is the project in? [help]			
<ul style="list-style-type: none"> • Go to http://www.ecy.wa.gov/services/gis/maps/wria/wria.htm to find the WRIA #. 			
9e. Will the in-water construction work comply with the State of Washington water quality standards for turbidity? [help]			
<ul style="list-style-type: none"> • Go to http://www.ecy.wa.gov/programs/wq/swqs/criteria.html for the standards. 			
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable			
9f. If the project is within the jurisdiction of the Shoreline Management Act, what is the local shoreline environment designation? [help]			
<ul style="list-style-type: none"> • If you don't know, contact the local planning department. • For more information, go to: http://www.ecy.wa.gov/programs/sea/sma/laws_rules/173-26/211_designations.html. 			
<input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Natural <input type="checkbox"/> Aquatic <input type="checkbox"/> Conservancy <input type="checkbox"/> Other _____			
9g. What is the Washington Department of Natural Resources Water Type? [help]			
<ul style="list-style-type: none"> • Go to http://www.dnr.wa.gov/BusinessPermits/Topics/ForestPracticesApplications/Pages/fp_watertyping.aspx for the Forest Practices Water Typing System. 			
<input type="checkbox"/> Shoreline <input type="checkbox"/> Fish <input type="checkbox"/> Non-Fish Perennial <input type="checkbox"/> Non-Fish Seasonal			

9h. Will this project be designed to meet the Washington Department of Ecology's most current stormwater manual? [\[help\]](#)

- **If no**, provide the name of the manual your project is designed to meet.

Yes No

Name of manual:

9i. If you know what the property was used for in the past, describe below. [\[help\]](#)

9j. Has a cultural resource (archaeological) survey been performed on the project area? [\[help\]](#)

- **If yes**, attach it to your JARPA package.

Yes No

9k. Name each species listed under the federal Endangered Species Act that occurs in the vicinity of the project area or might be affected by the proposed work. [\[help\]](#)

9l. Name each species or habitat on the Washington Department of Fish and Wildlife's Priority Habitats and Species List that might be affected by the proposed work. [\[help\]](#)

Part 10—SEPA Compliance and Permits

Use the resources and checklist below to identify the permits you are applying for.

- Online Project Questionnaire at <http://apps.ecy.wa.gov/opas/>.
- Governor's Office of Regulatory Assistance at (800) 917-0043 or help@ora.wa.gov.
- For a list of agency addresses to send your application, click on the "where to send your completed JARPA" at <http://www.epermitting.wa.gov>.

10a. Compliance with the State Environmental Policy Act (SEPA). (Check all that apply.) [help]

- For more information about SEPA, go to www.ecy.wa.gov/programs/sea/sepa/e-review.html.

A copy of the SEPA determination or letter of exemption is included with this application.

A SEPA determination is pending with _____ (lead agency). The expected decision date is _____.

I am applying for a Fish Habitat Enhancement Exemption. (Check the box below in 10b.) [help]

This project is exempt (choose type of exemption below).

Categorical Exemption. Under what section of the SEPA administrative code (WAC) is it exempt?

Other: _____

SEPA is pre-empted by federal law.

10b. Indicate the permits you are applying for. (Check all that apply.) [help]

LOCAL GOVERNMENT

Local Government Shoreline permits:

Substantial Development Conditional Use Variance

Shoreline Exemption Type (explain): _____

Other city/county permits:

Floodplain Development Permit Critical Areas Ordinance

STATE GOVERNMENT

Washington Department of Fish and Wildlife:

Hydraulic Project Approval (HPA) Fish Habitat Enhancement Exemption

Washington Department of Ecology:

Section 401 Water Quality Certification

Washington Department of Natural Resources:

Aquatic Resources Use Authorization

FEDERAL GOVERNMENT

United States Department of the Army permits (U.S. Army Corps of Engineers):

Section 404 (discharges into waters of the U.S.) Section 10 (work in navigable waters)

United States Coast Guard permits:

General Bridge Act Permit Private Aids to Navigation (for non-bridge projects)

Part 11—Authorizing Signatures

Signatures are required before submitting the JARPA package. The JARPA package includes the JARPA form, project plans, photos, etc. [\[help\]](#)

11a. Applicant Signature (required) [\[help\]](#)

I certify that to the best of my knowledge and belief, the information provided in this application is true, complete, and accurate. I also certify that I have the authority to carry out the proposed activities, and I agree to start work only after I have received all necessary permits.

I hereby authorize the agent named in Part 3 of this application to act on my behalf in matters related to this application. _____ (initial)

By initialing here, I state that I have the authority to grant access to the property. I also give my consent to the permitting agencies entering the property where the project is located to inspect the project site or any work related to the project. _____ (initial)

Applicant Printed Name	Applicant Signature	Date
------------------------	---------------------	------

11b. Authorized Agent Signature [\[help\]](#)

I certify that to the best of my knowledge and belief, the information provided in this application is true, complete, and accurate. I also certify that I have the authority to carry out the proposed activities and I agree to start work only after all necessary permits have been issued.

Authorized Agent Printed Name	Authorized Agent Signature	Date
-------------------------------	----------------------------	------

11c. Property Owner Signature (if not applicant). [\[help\]](#)

Not required if project is on existing rights-of-way or easements.

I consent to the permitting agencies entering the property where the project is located to inspect the project site or any work. These inspections shall occur at reasonable times and, if practical, with prior notice to the landowner.

Property Owner Printed Name	Property Owner Signature	Date
-----------------------------	--------------------------	------

18 U.S.C §1001 provides that: Whoever, in any manner within the jurisdiction of any department or agency of the United States knowingly falsifies, conceals, or covers up by any trick, scheme, or device a material fact or makes any false, fictitious, or fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious, or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years or both.

If you require this document in another format, contact The Governor's Office of Regulatory Assistance (ORA). People with hearing loss can call 711 for Washington Relay Service. People with a speech disability can call (877) 833-6341.
ORA publication number: ENV-019-09



US Army Corps
of Engineers
Seattle District

PROGRAMMATIC ESA¹ CONSULTATION
Specific Project Information Form
 For Mooring Buoys
 Version: February 2010



<p>Eligibility for Programmatic Consultation</p> <p>This application:</p> <p><input type="checkbox"/> Meets all of the requirements of this programmatic consultation</p> <p><input type="checkbox"/> Does not meet all of the requirements of this programmatic consultation. This form constitutes a reference biological evaluation in association with: NMFS reference: 2005/07506 USFWS reference: 13410-2009-I-0421</p>
--

1. **Programmatic Activity:** Mooring Buoys
2. **Drawings - *Drawings and photographs must be submitted.*** Drawings must include a vicinity map; plan, profile, and cross-section drawings of the proposed structures; and overwater structures on adjacent properties. (For assistance with the preparation of the drawings, please refer to our *Drawing Checklist* located on our website at www.nws.usace.army.mil Select Regulatory – Regulatory/Permits – Forms.)
3. **Date:** _____
4. **Applicant:** _____ **Corps Reference No.:** _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
5. **Agent:** _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
6. **Project Name (e.g., Alice's Restaurant):** _____
7. **Location(s) of Activity:**
Address: _____
City: _____ **State:** _____ **Zip:** _____
Section: _____ **Township:** _____ **Range:** _____
Latitude: _____ **Longitude:** _____
Waterbody: _____ **County:** _____
8. **Listed or Proposed Fish Species and their Critical Habitat Present:** _____

¹ Endangered Species Act

9. **Listed Non-Fish Species and their Critical Habitat Present:** _____

10. **Description of Work:** Describe what is being placed, installed, or constructed and the type of material used:

Construction Techniques – Describe how the work will be done:

Machinery (types): _____
By Hand: _____

11. **Forage Fish Habitat** – only complete this section if the project is in tidal waters.

Check box if Washington Department of Fish and Wildlife (WDFW) documented habitat is present. Go to the WDFW website for this information: <http://wdfw.wa.gov/fish/forage/forage.htm>, then search for each species under the link to Biology, then the link to Documented Spawning Grounds (if available, please attach a copy of the Hydraulic Project Approval from WDFW):

Surf Smelt:

Pacific Herring:

Sand Lance:

If there is no WDFW documented habitat present, please describe the type of substrate and elevation and presence of aquatic vegetation at the project area. For example:
At +10 to +5 feet above MLLW, there is no aquatic vegetation, the substrate consists of large cobbles.
At +5 to +1 foot above MLLW, there is eelgrass and the substrate consists of fine sand.

In addition, *please submit an eelgrass survey and photographs showing the entire project area.* The photographs should be taken at ground level and at low tide and should show a panoramic view of the entire project area in the dry. Photographs should clearly show the presence or absence of vegetation and the substrate composition. Close up photographs of the substrate and/or vegetation should be included if there are any areas of particular interest. To most accurately reflect vegetation distribution, photos should be taken at low tide during June 1 through October 1. Eelgrass survey is required for all mooring buoys installed landward of -30 MLLW. Survey must meet the state HPA requirements.

12. **Programmatic Conditions.** In order to meet all ESA requirements for this programmatic consultation, all programmatic conditions listed below **must be met**. Check each condition that you will meet. Check each item "not applicable" if they do not apply to your project. If you checked

“will not meet” for any of the conditions, you must complete the “Will Not Meet” section at the end of this document.

Will Meet	Will Not Meet	Not Applicable	Programmatic Conditions
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work will be performed within the approved work windows for listed species and forage fish.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No new access roads, routes, or trails will be included as part of the proposed action.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No stockpiling or staging of material will occur below OHW or MHHW.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Activity is limited to placement of mooring buoys for single boat, non-commercial use.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Buoy location will be accessed by a small boat or dinghy.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One or two SCUBA divers will screw a helical anchor into the substrate. Meets NMFS and FWS requirements.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the substrate is too hard for a helical screw, a 5-gallon bucket filled with cured concrete will be used. Meets NMFS and FWS requirements.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If substrate is too hard for a helical screw and a 5-gallon bucket filled with concrete is not adequate, a fully cured concrete block or steel anchor up to a maximum weight of 1.5 tons and maximum size of 4 cubic yards dependent on buoy size can be used. Meets FWS requirements, but will need NMFS concurrence.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Uncured concrete will not be allowed to come into contact with surface water.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Buoys will be placed at a water depth from 15 to 30 feet.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The buoy will be 1 to 3 feet in diameter, made of Styrofoam ball with plastic coating and a steel rod through the center with key holes at the top and bottom: one for the anchor attachment and one for the boat moorage.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All activities will be completed within a few hours, and any leftover material will be collected and disposed of off-site.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No solvents or other chemicals will be used in or over the water during the construction or operation of the proposed action.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No waste material, including material associated with treated wood decks, will enter the waterbody.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All waste material and construction debris will be collected and disposed of at an approved facility that is in compliance with the Endangered Species Act.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All floating debris generated during construction will be retrieved, removed, and disposed of at an approved upland location.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All natural habitat complexity features will be retained. Moved downed wood will be returned to its previous position following completion of the work.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All equipment that will operate over water or below OHWM or MHHW will be cleaned of accumulated grease, oil, or mud. All leaks will be repaired prior to arriving on site. Equipment will be inspected daily for leaks, accumulations of grease, etc., and any identified problems will be fixed before operating over water or below the OHWM or MHHW.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No work will be performed and structures and fill materials will not be placed in or adjacent to vegetated shallows (except where such vegetation is limited to State-designated noxious weeds), wetlands, special aquatic sites, or suitable forage fish spawning habitat.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If work will be done in or within 25 feet of an existing or previously designated Superfund site or Washington State Model Toxic Control Act (MTCA) site, BMPs established by EPA during CERCLA coordination or Washington State Department of Ecology during MTCA will be followed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Barges will not ground or rest on substrate and structures and attendant features (the anchor, buoy, and moored vessel) will not be located over or adjacent to (within 25 feet of) vegetated shallows (except where such vegetation is limited to State-designated noxious weeds). The anchor must be located at least 25 feet plus the length of the moored structure from vegetated shallows. <i>Attach eelgrass survey if project is landward of -30 MLLW. Survey must meet HPA standards.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Structures and attendant features (the anchor, buoy, and moored vessel) will not be located over or within 25 feet of spawning habitat for listed or proposed fish species. The anchor must be located at least 25 feet plus the length of the moored structure from spawning habitat.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Structures and attendant features (the anchor, buoy, and moored vessel) will not be located over or within 25 feet of spawning habitat for forage fish species. The anchor must be located at least 25 feet plus the length of the moored structure from spawning habitat.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Buoys will not exceed four per acre at any time (and no more than three existing buoys within 120-foot radius of proposed buoy).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Buoy anchors will be installed so that the anchor line does not drag or scour.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Flotation will be completely contained to prevent breakup.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vessels will not ground out at low water.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bottom of any structure, vessel, watercraft grid, or watercraft lift will be at least 1 foot above the level of the substrate during all water levels.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fueling and servicing of equipment will be confined to an established staging area that is at least 150 feet from open water or wetlands. Spill containment systems must be adequate to contain all fuel leaks.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment and vehicles will be stored in established staging areas when not in use (excluding cranes, which cannot be easily moved).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A written spill prevention, control, and countermeasures plan will be prepared for activities that include the use of heavy equipment. The plan will describe measures to prevent or reduce impacts from accidental leaks or spills, and will contain a description of all hazardous materials that will be used, proper storage and handling, and monitoring methods. A spill kit will be available onsite during construction and stored in a location that facilitates immediate deployment if needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The project will comply with the <i>General Implementation Conditions</i> for our programmatic consultations (Note: These are located on our website at www.nws.usace.army.mil . Select Regulatory – Regulatory/Permits – Forms.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Projects within 1/4 mile of suitable western snowy plover nesting or foraging habitat will not occur from March 15 through September 30.

If the applicant will meet **all** of the above conditions, then the applicant must sign below:

I, as the applicant, have read all the USFWS and NMFS requirements for their Programmatic Consultations dated September 9, 2009 and January 16, 2008, respectively. These requirements are listed on the Seattle District Corps webpage at http://www.nws.usace.army.mil/PublicMenu/Menu.cfm?sitename=REG&pagename=Phase_I. I certify that this project meets all applicable requirements of the programmatic consultations. In the event that the U.S. Army Corps of Engineers, Seattle District, the U.S. Fish and Wildlife Service, and/or the National Marine Fisheries Service/NOAA Fisheries determine that the requirements have not been met, I agree to comply with all resolution measures in accordance with Corps regulations.

Applicant

Date

If the applicant **has checked "Will Not Meet" for any of the above conditions**, or there are associated project activities not covered by this Programmatic Consultation or new species and/or critical habitat is not covered under this Programmatic Consultation, then this section must be completed and the applicant must sign below:

1. Why can't you meet all of the conditions of this programmatic consultation? _____

2. Are there associated project activities not covered by this Programmatic Consultation? If so, what are the impacts of associated project activities not covered by this Programmatic Consultation: _____

3. Are there species and/or critical habitat in the vicinity of the project that are not covered under this Programmatic Consultation? If so, what are the impacts to species not covered under this Programmatic Consultation: _____

4. Why are the impacts of the proposed project "Not Likely to Adversely Affect" ESA species? How have you minimized impacts? (Note: If your effect analysis is lengthy, you may attach an addendum.) _____

I, as the applicant, have read all the USFWS and NMFS requirements for their Programmatic Consultations dated September 9, 2009 and January 16, 2008, respectively. These requirements are listed on the Seattle District Corps webpage at http://www.nws.usace.army.mil/PublicMenu/Menu.cfm?sitename=REG&pagename=Phase_I. I understand that informal consultation with National Marine Fisheries Service and U.S. Fish and Wildlife Service will be initiated with this form. I will not proceed with construction until I receive written notification from the U.S. Army Corps of Engineers that the proposed work is authorized.

Applicant

Date

----- Below to be completed by the Corps -----

Note to PM: If the applicant meets all of the conditions of this programmatic consultation, complete this section. If the applicant does not meet all of the conditions of this programmatic consultation, do not complete this section; instead, complete a Memorandum for the Services – Reference Biological Evaluation Form.

I have reviewed the Department of the Army application and this form for consistency with the USFWS and NMFS requirements Programmatic Consultations dated September 9, 2009 and January 16, 2008, respectively.

Additional Information (complete as applicable):

1. Summary of ESA consultation for associated project activities not covered by the Programmatic Consultation: _____

2. Approved Work Window:

_____ to _____

3. Summary of ESA Consultation for species not covered under this consultation: _____

4. Summary of ESA Consultation for critical habitat not covered under this consultation (e.g., "no effect" analysis for newly designated critical habitat, date consultation completed, etc): _____

Corps Project Manager

Date

Corps Senior Scientist

Date