Office of Department General Services of State



JOINT APPLICATION FORM

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

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

Applications To: NYS Department of Environmental Conservation Check here to confirm you sent this form to NYSDEC.		
Check all permits that apply: Stream Disturbance Stream Disturbance Excavation and Fill in Navigable Waters Docks, Moorings or Platforms PUS Army Corps of Engineers Check all permits that apply: Section 404 Clean Water Act Section 10 Rivers and Harbors Act Incidental Take of Endangered / Endangered / Threatened Species Check here to confirm you sent this form to USACE. Section 10 Rivers and Harbors Act Is the project Federally funded? Yes No If yes, name of Federal Agency: General Permit Type(s), if known:		
Preconstruction Notification: Yes No		
>NYS Office of General Services Check all permits that apply: State Owned Lands Under Water Utility Easement (pipelines, conduits, cables, etc.) Docks, Moorings or Platforms >NYS Department of State Check here to confirm you sent this form to NYSDOS.		
Check if this applies: Coastal Consistency Concurrence		
2. Name of Applicant Mailing Address Post Office / City Telephone Email Applicant Must be (check all that apply): Owner Taxpayer ID (if applicant is NOT an individual) Post Office / City State Zip Operator Depart Operator Lessee		
3. Name of Property Owner (if different than Applicant)		
Mailing Address Post Office / City State Zip Telephone Email		
For Agency Use Only Agency Application Number:		

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

4. Name of Contact / Agent	1
Mailing Address	Post Office / City State Zip
Telephone Email	
5. Project / Facility Name	Property Tax Map Section / Block / Lot Number:
Project Street Address, if applicable	Post Office / City State Zip NY
Provide directions and distances to roads, intersections, brid	dges and bodies of water
☐ Town ☐ Village ☐ City County	Stream/Waterbody Name
Project Location Coordinates: Enter Latitude and Longitude	in degrees, minutes, seconds:
Latitude: v Latitu	Longitude: o ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
6. Project Description: Provide the following information a any additional information on other pages. Attach plans or a. Purpose of the proposed project:	
b. Description of current site conditions:	
c. Proposed site changes:	
d. Type of structures and fill materials to be installed, and coverage, cubic yards of fill material, structures below o	
e. Area of excavation or dredging, volume of material to be	e removed, location of dredged material placement:
f. Is tree cutting or clearing proposed? Yes If Y	es, explain below.
Timing of the proposed cutting or clearing (month/year)	·
Number of trees to be cut: Acre	eage of trees to be cleared:

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

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

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

7. Signatures.

Applicant and Owner (If different) must sign the application.

Append additional pages of this Signature section if there are multiple Applicants, Owners or Contact/Agents.

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

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

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

material fact; or knowingly makes or uses a false, fictitious or fraudulent statement.		
Signature of Applicant Date		
Applicant Must be (check all that apply): Owner Operator Lessee		
Applicant Must be (check all that apply) Owner Operator Lessee		
Printed Name Title		
Signature of Owner (if different than Applicant) Date		
Printed Name Title		
Signature of Contact / Agent Date		
Printed Name		
For Agency Use Only DETERMINATION OF NO PERMIT REQUIRED		
Agency Application Number		
required from this Agency for the project described in this application. (Agency Name) has determined that No Permit is		
Agency Representative:		
Printed Title		
Name		
Signature Date		