



**US Army Corps
Of Engineers (Portland District)**

Joint Permit Application Form

DATE STAMP



AGENCIES WILL ASSIGN NUMBERS

Corps Action ID Number

Oregon Department of State Lands No

SEND ONE SIGNED COPY OF YOUR APPLICATION TO EACH AGENCY

US Army Corps of Engineers:

District Engineer
ATTN: CENWP-OD-GPPO
Box 2946
Portland, OR 97208-2946
503-808-4373

AND

DSL - West of the Cascades:

State of Oregon
Department of State Lands
775 Summer Street, Suite 100
Salem, OR 97301-1279
503-378-3805

OR

DSL - East of the Cascades:

State of Oregon
Department of State Lands
1645 NE Forbes Road, Suite 112
Bend, Oregon 97701
541-388-6112

AND

Send DSL Application Fees to:

State of Oregon
Department of State Lands
PO Box 4395, Unit 18
Portland, OR 97208-4395
(Attach a copy of the first page of the application)

(1) APPLICANT INFORMATION

Name and Address

Business Phone #
Home Phone #
Fax #
Email

Authorized Agent

Name and Address

Check one

Consultant

Contractor

Business Phone #
Home Phone #
Fax #
Email

Property Owner

Name and Address

If different from above¹

Business Phone #
Home Phone #
Fax #
Email

(2) PROJECT LOCATION

Street, Road or Other Descriptive Location

Legal Description (attach [tax lot map](#)*)

Township

Range

Section

Quarter/Quarter

In or near (City or Town)

County

Tax Map #

Tax Lot #²

Wetland/Waterway (pick one)

River Mile (if known)

[Latitude \(in DD.DDDD format\)](#)

[Longitude \(in DD.DDDD format\)](#)

Directions to the site

¹ If applicant is not the property owner, permission to conduct the work must be attached.

² Attach a copy of all tax maps with the project area highlighted.

* *Italicized areas are not required by the Corps for a complete application, but may be necessary prior to final permit decision by the Corps.*

(3) PROPOSED PROJECT INFORMATION

Type: Fill Excavation (removal) In-Water Structure Maintain/Repair an Existing Structure

Brief Description:

Fill

Riprap Rock Gravel Organics Sand Silt Clay Other:

Wetlands	Permanent (cy)	Temporary (cy)				Total cubic yards for project (including outside OHW/wetlands)	
	Impact Area in Acres	Dimensions (feet)					
		L'		W'			
Waters below OHW	Permanent (cy)	Temporary (cy)				Total cubic yards for project (including outside OHW/wetlands)	
	Impact Area in Acres	Dimensions (feet)					
		L'		W'			

Removal

Wetlands	Permanent (cy)	Temporary (cy)				Total cubic yards for project (including outside OHW/wetlands)	
	Impact Area in Acres	Dimensions (feet)					
		L'		W'			
Waters below OHW	Permanent (cy)	Temporary (cy)				Total cubic yards for project (including outside OHW/wetlands)	
	Impact Area in Acres	Dimensions (feet)					
		L'		W'			

Total acres of construction related ground disturbance (If 1 acre or more a [1200-C permit](#) may be required from DEQ)

Is the disposal area upland? Yes No Impervious surface created? 0<1 acre 0>1 acre?

Are you aware of any [state](#) or [federally](#) listed species on the project site?
 Are you aware of any [Cultural/Historic Resources](#) on the project site?
 Is the project site within a national [Wild & Scenic River](#)?
*Is the project site within a State Scenic [State Scenic Waterway](#)?**

Yes	No	If yes, please explain in the project description (in block 4)

(4) PROPOSED PROJECT PURPOSE AND DESCRIPTION

Purpose and Need:

*Provide a description of the public, social, economic, or environmental benefits of the project along with any supporting formal actions of a public body (e.g. city or county government), as appropriate.**

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Project Description:

Please describe in detail the proposed removal and fill activities, including the following information:

- Volumes and acreages of all fill and removal activities in waterway or wetland separately
- Permanent and temporary impacts
- Types of materials (e.g., gravel, silt, clay, etc.)
- How the project will be accomplished (i.e., describe construction methods, equipment, site access)
- *Describe any changes that the project may make to the hydraulic and hydrologic characteristics (e.g., general direction of stream and surface water flow, estimated winter and summer flow volumes.) of the waters of the state, and an explanation of measures taken to avoid or minimize any adverse effects of those changes.*
- Is any of the work already complete? Yes No If yes, please describe the completed work.

In addition, for fish habitat or wetland restoration or enhancement activities, complete the information requested in supplemental Fish Habitat or Wetland Restoration and Enhancement form.

Project Drawings

State the number of project drawing sheets included with this application:

A complete application must include a location map, site plan, cross-section drawings and recent aerial photo as follows and as applicable to the project:

- **Location map** (must be legible with street names)
 - Site plan including;
 - Entire project site and activity areas
 - Existing and proposed contours
 - Location of ordinary high water, wetland boundaries or other jurisdictional boundaries
 - Identification of temporary and permanent impact areas within waterways or wetlands
 - Map scale or dimensions and north arrow
 - Location of staging areas
 - Location of construction access
 - Location of cross section(s), as applicable
 - Location of mitigation area, if applicable
- **Cross section drawing(s)** including;
 - Existing and proposed elevations
 - Identification of temporary and permanent impact areas within waterways or wetlands
 - Ordinary high water and/or wetland boundary or other jurisdictional boundaries
 - Map scale or dimensions
- **Recent Aerial photo** (1:200, or if not available for your site, [the highest resolution available](#))

Will any construction debris, runoff, etc., enter a wetland or waterway? Yes No

If yes, describe the type of discharge and show the discharge location on the site plan.

Estimated project start date:

Estimated project completion date:

(5) PROJECT IMPACTS AND ALTERNATIVES

Alternatives Analysis:

Describe alternative sites and project designs that were considered to avoid or minimize impacts to the waterway or wetland. (Include alternative design(s) with less impact and reasons why the alternative(s) were not chosen. Reference OAR [141-085-0025](#) (3(j)) and [141-085-0029](#) (4through 6) for more information*).

Measures to Minimize Impacts

Describe what measures you will use (before and after construction) to minimize impacts to the waterway or wetland. These may include but are not limited to the following:

- *For projects with ground disturbance include an erosion control plan or description of other best management practices (BMP's) as appropriate. (For more information on erosion control practices see DEQ's Oregon [Sediment and Erosion Control Manual](#))*
- *For work in waterways where fish or flowing water are likely to be present, discuss how the work area will be isolated from the flowing water.*
- *If native migratory fish are present (or were historically present) and you are installing, replacing or abandoning a culvert or other potential obstruction to fish passage, complete and attach a statement of how the [Fish Passage Requirements](#), set by the Oregon Department of Fish and Wildlife will be met.*

Description of resources in project area

Ocean

Estuary

River

Lake

Stream

Freshwater Wetland

Describe the existing **physical and biological characteristics** of the wetland/waterway site by area and type of resource (Use separate sheets and photos, if necessary).

For wetlands, include, as applicable:

- *Cowardin and Hydrogeomorphic(HGM) wetland class(s)**
- *Dominant plant species by layer (herb, shrub, tree)**
- Whether the wetland is freshwater or tidal
- *Assessment of the functional attributes of the wetland to be impacted**
- Identify any vernal pools, bogs, fens, mature forested wetland, seasonal mudflats, or native wet prairies in or near the project area.)

For waterways, include a description of, as applicable:

- *Channel and bank conditions**
- *Type and condition of riparian vegetation**
- *Channel morphology (i.e., structure and shape)**
- *Stream substrate**
- Fish and wildlife (type, abundance, period of use, significance of site)
- *General hydrological conditions (e.g. stream flow, seasonal fluctuations)**

*Describe the existing navigation, fishing and recreational use of the waterway or wetland.**

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Site Restoration/Rehabilitation

- For temporary disturbance of soils and/or vegetation in waterways, wetlands or riparian areas, please discuss how you will restore the site after construction including any monitoring, if necessary*

Mitigation

Describe the reasonably expected adverse effects of the development of this project and how the effects will be mitigated.*

- For permanent impact to wetlands, complete and attach a Compensatory Wetland Mitigation (CWM) Plan. (See [OAR 141-085-0121 to OAR 141-085-0176](#) for plan requirements)*
- For permanent impact to waterways or riparian areas, complete and attach a Compensatory Mitigation (CM) plan (See [OAR 141-085-0115](#) for plan requirements)*
- For permanent impact to estuarine wetlands, you must submit an Estuarine Resource Replacement Plan. (See [OAR 141-085-0240 to OAR 141-085-0257](#) for plan requirements)*

Mitigation Location Information (Fill out only when mitigation is proposed or required)

Proposed mitigation
(Check all that apply):

- Onsite Mitigation
- Offsite Mitigation
- Mitigation Bank
- Payment to Provide

Type of mitigation:

- Wetland Mitigation
- Mitigation for impacts to other waters
- Mitigation for impacts to navigation, fishing, or recreation

Street, Road or Other Descriptive Location		Legal Description (attach tax lot map *)			
		Quarter/Quarter	Section	Township	Range
In or near (City or Town)	County	Tax Map #		Tax Lot # ³	
Wetland/Waterway (pick one)	River Mile (if known)	Latitude (in DD.DDDD format)		Longitude (in DD.DDDD format)	
Name of waterway/watershed/ HUC		Name of mitigation bank (if applicable)			

³ Attach a copy of all tax maps with the project area highlighted.

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(6) ADDITIONAL INFORMATION

Adjoining Property Owners and Their Address and Phone Numbers (*if more than 5, attach printed labels**)

Has the proposed activity or any related activity received the attention of the Corps of Engineers or the Department of State Lands in the past, e.g., wetland delineation, violation, permit, lease request, etc.?

Yes No

If yes, what identification number(s) were assigned by the respective agencies:

Corps #

State of Oregon #

Has a wetland delineation been completed for this site?

Yes *No*

*If yes by whom?**

Has the wetland delineation been approved by DSL or the COE?

Yes *No*

*If yes, attach a concurrence letter. **

**(7) CITY/COUNTY PLANNING DEPARTMENT AFFIDAVIT
(TO BE COMPLETED BY LOCAL PLANNING OFFICIAL) ***

I have reviewed the project outlined in this application and have determined that:

- This project is not regulated by the comprehensive plan and land use regulations.
- This project is consistent with the comprehensive plan and land use regulations.
- This project will be consistent with the comprehensive plan and land use regulations when the following local approval(s) are obtained.
- Conditional Use Approval
- Development Permit
- Other

This project is not consistent with the comprehensive plan. Consistency requires a

- Plan Amendment
- Zone Change
- Other

An application has has not been filed for local approvals checked above.

Local planning official name (print)	Signature	Title	City / County	Date

Comments:

(8) COASTAL ZONE CERTIFICATION *

If the proposed activity described in your permit application is within the [Oregon coastal zone](#), the following certification is required before your application can be processed. A public notice will be issued with the certification statement, which will be forwarded to the Oregon Department of Land Conservation and Development for its concurrence or objection. For additional information on the Oregon Coastal Zone Management Program, contact the department at 635 Capitol Street NE, Suite 150, Salem, Oregon 97301 or call 503-373-0050.

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge and belief, the proposed activity described in this application complies with the approved Oregon Coastal Zone Management Program and will be completed in a manner consistent with the program.

Print /Type Name	Title
Applicant Signature	Date

** Italicized areas are not required by the Corps for a complete application, but may be necessary prior to final permit decision by the Corps.*

(9) SIGNATURES FOR JOINT APPLICATION

Application is hereby made for the activities described herein. I certify that I am familiar with the information contained in the application, and, to the best of my knowledge and belief, this information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. By signing this application I consent to allow Corps or Dept. of State Lands staff to enter into the above-described property to inspect the project location and to determine compliance with an authorization, if granted. I hereby authorize the person identified in the authorized agent block below to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application.

I understand that the granting of other permits by local, county, state or federal agencies does not release me from the requirement of obtaining the permits requested before commencing the project. *I understand that payment of the required state processing [fee](#) does not guarantee permit issuance. The fee for the state application must accompany the application for completeness.*

Amount enclosed	\$
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Print /Type Name	Title	Print /Type Name	Title
Applicant Signature	Date	Authorized Agent Signature	Date

Landowner signatures: For projects and/or mitigation work proposed on land not owned by the applicant, including [state-owned submerged and submersible lands](#), please provide signatures below. A signature by the Department of State Lands for activities proposed on state-owned submerged/submersible lands only grants the applicant consent to apply for authorization to conduct removal/fill activities on such lands. This signature for activities on state-owned submerged and submersible lands grants no other authority, express or implied.

Print /Type Name	Title	Print /Type Name	Title
Property Owner Signature	Date	Mitigation Property Owner Signature	Date