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Application for Department of the Army Permit : MaineDot 2 Year Bridge Initiative, February 13, 2009

Maine Department of Transportation

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APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT (33 CFR 325)

OMB APPROVAL NO. 0710-003

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PRIVACY ACT STATEMENT

Authority: 33 USC 401, Section 10: 1413, Section 404. Principal Purpose: These laws require authorizing activities in, or affecting, navigable waters of the United States, the discharge or fill material into waters of the United States, and the transportation of dredged material for the purpose of dumping it into ocean waters. Routine Uses: Information provided on this form will be used in evaluating the application for a permit. Disclosure: Disclosure of requested information is voluntary. If Uses: Information provided on this form will be used in contacting the error information is not provided, however, the permit application cannot be processed nor can a permit be issued.

One set of original drawings or good reproducible copies

which show the location and character of the proposed activity must be attached to this application (see sample drawings and instructions) and be submitted to the

District Engineer naving jurisdiction	over the location of the proposed activity.	An application that is not completed	d III full will be returned.				
(ITEMS 1 THRU 4 TO BE FILLED BY THE CORPS)							
1. APPLICATION NO.	2. FIELD OFFICE CODE	3. DATE RECEIVED	4. DATE APPLICATION COMPLETED				
(ITEMS BELOW TO BE FILLED BY APPLICANT)							
5. APPLICANT'S NAME: 8. AUTHORIZED AGENT'S NAME AND TITLE (an agent is not required)							
Maine Department of Transportation							
6. APPLICANT'S ADDRESS		9. AGENT'S ADDRESS					
Maine Department of Transportation							
16 State House Station Augusta, Maine 04333-0016							
7 agasta, Manie 04000	0010						
7. APPLICANT'S PHONE NOs. W/AREA CODE a. Residence		0. AGENT'S PHONE NOs. W/AREA CODE a. Residence					
b. Business 207-624-3100		b. Business					
11. STATEMENT OF AUTHORIZATION							
I hereby authorize, 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. APPLICANT'S SIGNATURE DATE							
NAME, LOCATION, AND DESCRIPTION OR PROJECT OR ACTIVITY							
12. PROJECT NAME OR TITLE: MaineDOT 2 Year Bridge Initiative							
13. NAME OF WATERBODY, IF KNOWN (if applicable)			14. PROJECT STREET ADDRESS (if applicable)				
Please refer to Attachment 1 of DEP Application		n Please refer to A	Please refer to Attachment 1 of DEP Application				
15. LOCATION OF PROJECT							
Please refer to Attach	ment 1 of DEP Applicatio	n					
COUNTY	STATE						
16. OTHER LOCATION DESCRIPTIONS, IF KNOWN (see instructions) Section, Township, Range, Lat/Lon, and/or Accessors's Parcel Number, for example.							
Please refer to Attachment 1 of DEP Application							
17. DIRECTIONS TO THE SITE: Please refer to Attachment 1 of DEP Application							
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ENG FORM 4345 EDITION OF SEP 91 IS OBSOLETE (Proponent: CECW-OR)

Bri	Nature of Activity (Description of a dge projects throughous a replacement.		n scope from maintenance and r	ehabilitation, to removal		
To	address critical bridge		diate attention to ensure public ppendix A of DEP Application)	safety and protect the		
	USE BLOC	KS 20-22 IF DREDGED AND/O	R FILL MATERIAL IS TO BE DISC	CHARGED		
D of	the DEP Application	. These bridges are listed	omplete the bridge projects o as "critical" and need immed economic vitality of Maine's	iate attention to protect		
21.	Type(s) of Material Being Discharged and the Amount of Each Type in Cubic Yards Various types depending on Bridge and Scope. Please review Attachment 3 of DEP Application.					
22.	2. Surface Area in Acres of Wetlands or Other Waters Filled (see instructions) Varies depending on Bridge and Scope. Please review Attachment 3 of DEP Application.					
23.	Is Any Portion of the Work Already Complete? Yes No X IF YES, DESCRIBE THE COMPLETED WORK					
24.	Addresses of Adjoining Property Owners, Lessees, Etc., Whose Property Adjoins the Waterbody (If more than can be entered here, please attach a supplemental list). These details are unknown at this time.					
25.	AGENCY TYPE APF IF&W Fish and ASC Fish and DMR Fish and USFWS Fish and NMFS Fish and MHPC Section 1 FHWA NEPA Rev MaineDEP Water Qu		ederal, State, or Local Agencies for Work D REVIEW INFORMA Please review Attachment 1 o Please review Attachment 5 o On-going On-going	TION f DEP Application		
26.	application is complete and accurate. 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.					
	SIGNATURE OF APPLIC	2/13/09	SIGNATURE OF AGENT	DATE		
	SIGNATURE OF APPLICANT DATE SIGNATURE OF AGENT DATE The application must be signed by the person who desires to undertake the proposed activity (applicant) or it may be signed by a duly authorized agent if the statement in block 11 has been filled out and signed.					
	knowingly and willfully falsification fraudulent statements or representations.	es, conceals, or covers up any trick, s esentations or makes or uses any false	thin the jurisdiction of any department or a cheme, or disguises a material fact or ma e writing or document knowing same to co r imprisoned not more than five years or bot	akes any false, fictitious or ntain any false, fictitious or		

(Proponent: CECW-OR)