RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF WATER RESOURCES \ FRESHWATER WETLANDS PROGRAM

235 Promenade Street, Providence, RI 02908 Telephone: 401-222-6820, Rhode Island Relay 711

GENERAL APPLICATION FORM

Please type or print

PART A Purpose of Application (see 250-RICR-150-15-1)

- □ Request to Determine Presence of Wetlands only (250-RICR-150-15-1.8(B))
- □ Request to Verify Delineated Edge of Wetlands (250-RICR-150-15-1.8(C))
- □ Request for Preliminary Determination (250-RICR-150-15-1.9)
- Application to Alter a Freshwater Wetland (250-RICR-150-15-1.10)
- Application for Permit Renewal (250-RICR-150-15-1.11(B)) Complete Only Parts B, D & H
- □ Application for Permit Modification (250-RICR-150-15-1.11(C))
- □ Application for Permit Transfer (250-RICR-150-15-1.11(D)) Complete Only Parts B, E & H
- Change in Owner during review (250-RICR-150-15-1.7(A)(2)(e)) Complete Only Parts B, F & H

PART B Applicant Information:

Applicant's Name (see 250-RICR-150-15-1.7(A)(2)):

<u>Note</u>: The applicant must be the owner of the property or easement which is the subject of this application or must be the government agency or entity with power of condemnation over such property or easement.

Zip Code

Applicant's Mailing Address:

Street/Road

State

City/Town

Applicant's Email Address: (print legibly):

Property Location subject to this Application:

City/Town	Street Abutting Site	Street a	address 1	number (i	f applicable)
Nearest street intersection and its dis	tance and direction from site				
Nearest utility pole number(s):	Direction to site from abutting	g street: N	<u>S</u>	E	W

Tax Assessor's Plat(s) and Lot No(s):

Recorded Plat(s) and Lot No(s) (if Assessor's are not available):

PART C General Information:

Any previous application for this site? YesNo	Provide Application No(s)
Any previous enforcement action for this site? Yes	No Provide File No(s)
Amount of wetland area to be altered, if any:	
Palustrine wetland:	square feet
Riverbank or perimeter wetland:	square feet
Watercourse:	linear feet

Check here if any floodplain alteration is proposed.

• Fee category per 250-RICR-150-15-1.7(A)(11) (ex. 1.7(A)(11)(d)(6) 2-lots sub. Pre-Det. \$900)	_Check No.
Check here if the project has a Certificate of Critical Economic Concern (CEC) and attach copy of certificat	ion.

PART D For Application for Permit Renewal (if applicable):

Name of Original or Subsequent Permittee:

Application/Permit No.

Number of previous renewals issued (if applicable):

Applicant's Statement:	I hereby state that I am requesting renewal of the original or subsequently modified permitted project under
Application/Permit No.	. I fully understand the permit limitations and will comply with any and all
conditions of the permit.	
Applicant's name: (print)	(signature)

Check here if actual site work has commence	d on the project for w	hich renewal is requested.
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Permit Expiration Date:

AGENCY USE ONLY

Application No:

Application Received:

P.O. Box

Telephone No.

PART E For Application for Permit Transfer (if applied	cable):		
Original Permittee's Name:			
	Permit Expiration Date:		
<u>Note</u> : A certified copy of the deed of transfer must be enclosed with application.			
Applicant's Statement : I hereby certify that I have reviewed the p and hereby agree to comply with all conditions of the permit, inclu			
Applicant's Name (print):(signal	ature): Date:		
PART F For Change in Owner During Application Pr	ocessing (if applicable):		
Original Applicant's Name: <u>Note</u> : A certified copy of the deed of transfer must be enclosed for	Application No or Applications to Alter only.		
PART G Certification of Professional(s) (if applicable): Note: Any professional (e.g. engineer, biologist and/or preparation of this Application and supplication	, landscape architect, etc.) who participated in the submission		
I hereby certify that I have been authorized by the applicant to prep that such documentation is in accordance with the <u>Rules and Reg</u> <u>Freshwater Wetlands Act (250-RICR-150-15-1)</u> ; and that such d knowledge.	gulations Governing the Administration and Enforcement of the		
Professional's Name (print):	Title:		
Email (print legibly):	d/b/a:		
Address:			
Professional's Signature:			
 Check this box if the above named is the project manag I've completed and attached the <u>Site Work Affidavit</u>. 	er or project lead for the applicant.		
If more than one professional: Professional's Name (<i>print</i>):	Title:		
Email (print legibly):	d/b/a:		
Address:			
Professional's Signature:	Date:		
□ I've completed and attached the Site Work Affidavit	-		
Professional's Name (print):			
Email (print legibly):			
Address:			
Professional's Signature:			
☐ I've completed and attached the <u>Site Work Affidavit</u>	•		
PART H Certification/Authorization of Applicant:			
I hereby certify that I have requested and authorized the investigatio form, contained in this Application; that I have personally examine such information is true, accurate and complete to the best of my property for purposes of observing conditions pertinent to this appli- resulting from this application, including any sampling, monitorin the RIDEM Administrative Inspection Guidelines. (See DEM web Note any special concerns for access here:	d and am familiar with the information submitted herein; and that knowledge. I hereby authorize RIDEM personnel access to the cation and assessing compliance with any permit or determination g or surveying that may be deemed appropriate, consistent with		
Applicant's Signature:	Title (if applicable):		
Print Name Signed Above:			
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