

U.S. Army Corps of Engineers (USACE)  
**APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT**  
 33 CFR 325. The proponent agency is CECW-CO-R.

*Form Approved -  
 OMB No. 0710-0003  
 Expires: 01-08-2018*

The public reporting burden for this collection of information, OMB Control Number 0710-0003, is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at [whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR APPLICATION TO THE ABOVE EMAIL.

**PRIVACY ACT STATEMENT**

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated 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/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned. System of Record Notice (SORN). The information received is entered into our permit tracking database and a SORN has been completed (SORN #A1145b) and may be accessed at the following website: <http://dpcld.defense.gov/Privacy/SORNSIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx>

**(ITEMS 1 THRU 4 TO BE FILLED BY THE CORPS)**

1. APPLICATION NO.	2. FIELD OFFICE CODE	3. DATE RECEIVED	4. DATE APPLICATION COMPLETE
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**(ITEMS BELOW TO BE FILLED BY APPLICANT)**

5. APPLICANT'S NAME First -                      Middle -                      Last - Company - E-mail Address -			8. AUTHORIZED AGENT'S NAME AND TITLE (agent is not required) First -                      Middle -                      Last - Company - E-mail Address -		
6. APPLICANT'S ADDRESS: Address- City -                      State -                      Zip -                      Country -			9. AGENT'S ADDRESS: Address- City -                      State -                      Zip -                      Country -		
7. APPLICANT'S PHONE NOs. w/AREA CODE a. Residence                      b. Business                      c. Fax			10. AGENTS PHONE NOs. w/AREA CODE a. Residence                      b. Business                      c. Fax		

**STATEMENT OF AUTHORIZATION**

11. 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.

\_\_\_\_\_  
SIGNATURE OF APPLICANT                      DATE

**NAME, LOCATION, AND DESCRIPTION OF PROJECT OR ACTIVITY**

12. PROJECT NAME OR TITLE (see instructions)			
13. NAME OF WATERBODY, IF KNOWN (if applicable)		14. PROJECT STREET ADDRESS (if applicable) Address	
15. LOCATION OF PROJECT Latitude: °N                      Longitude: °W		City -                      State-                      Zip-	
16. OTHER LOCATION DESCRIPTIONS, IF KNOWN (see instructions) State Tax Parcel ID                      Municipality Section -                      Township -                      Range -			

17. DIRECTIONS TO THE SITE

18. Nature of Activity (Description of project, include all features)

19. Project Purpose (Describe the reason or purpose of the project, see instructions)

**USE BLOCKS 20-23 IF DREDGED AND/OR FILL MATERIAL IS TO BE DISCHARGED**

20. Reason(s) for Discharge

21. Type(s) of Material Being Discharged and the Amount of Each Type in Cubic Yards:

Type	Type	Type
Amount in Cubic Yards	Amount in Cubic Yards	Amount in Cubic Yards

22. Surface Area in Acres of Wetlands or Other Waters Filled (see instructions)

Acres  
or  
Linear Feet

23. Description of Avoidance, Minimization, and Compensation (see instructions)

