## U.S. Army Corps of Engineers, Alaska District <u>PRECONSTRUCTION NOTIFICATION FORM</u>

May be used instead of Form ENG 4345 to request verification under Bethel Regional General Permit (RGP) POA-2016-476

Applicant:	Phone:
Address:	Fax:
City, State, Zip:	Cell/Direct Line:
Point of Contact:	e-mail:
Agent:	Phone:
Address:	Fax:
City, State, Zip:	Cell/Direct Line:
Point of Contact:	e-mail:

## Location of the Proposed Project Site:

Nearest Waterway:	
Section, Township, Range, and Meridian:	
Latitude and Longitude (Decimal Degrees, NAD-83):	
Driving Directions to Site:	
Other:	

## Project Description:

To ensure your project meets the requirem	ents for the Bethel RGP	P, read all of the terms and cond	itions of the RGP, which
may be found on our website at:			

Description of the proposed project and all associated actions (i.e., what construction activities are proposed for the overall project. You must specifically include the areas (i.e., acreages or square feet) and type (rock, dirt, concrete, etc.) of all proposed discharges of fill material.

Project purpose:

Does the proposed activity involve an expansion to or work on or adjacent to an existing fill?							
Will any or all components of the overall single and complete project result in a loss greater than 1 acre of wetlands or be located in an area(s) excluded from GP coverage?							
*Attach drawings of the site and project plans (For more information on acceptable drawings and plans, please visit our website at <u>http://www.poa.usace.army.mil/reg/permitapp.htm</u> and click on "Guide to Drawings") *Sign and date and attach Preliminary Jurisdictional Determination Form. *Attach approved Site Plan from City of Bethel							
Application is hereby made for a permit or permits to authorize the work described in this preconstruction notification form.   I certify the information in this preconstruction notification form 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 APPLICANT DATE SIGNATURE OF AGENT DATE							