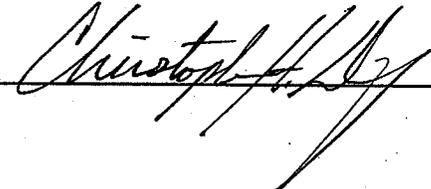


Check box if data is enclosed for any one or more of the following (see checklist for required information):

- |  |  |   |
|--|--|---|
| A. <input type="checkbox"/> Soil borings                   | D. <input checked="" type="checkbox"/> Field surveys           | G. <input type="checkbox"/> Site plan                           |
| B. <input checked="" type="checkbox"/> Wetland data sheets | E. <input checked="" type="checkbox"/> Alternate site analysis | H. <input type="checkbox"/> Avoidance and minimization analysis |
| C. <input checked="" type="checkbox"/> Photographs         | F. <input checked="" type="checkbox"/> Market analysis         |   |
- I. Other (explain)      B. Resource Report 2 (Water Use and Water Quality)- Appendix 2D: Wetland Delineation Report  
C. Resource Report 2 (Water Use and Water Quality)- Appendix 2D: Wetland Delineation Report  
D. Resource Report 2 (Water Use and Water Quality)- Appendix 2D: Wetland Delineation Report and Resource Report 3 (Wildlife and Vegetation)  
E. Resource Report 10 (Alternatives)  
F. Resource Reports 5 (Socioeconomics) and 10 (Alternatives)

**CERTIFICATION:**

I hereby designate and authorize the agent named above to act on my behalf in the processing of this application and to furnish any information that is requested. I certify that the information on this form and on the attached plans and specifications is true and accurate to the best of my knowledge and belief. I understand that any of the agencies involved in authorizing the proposed works may request information in addition to that set forth herein as may be deemed appropriate in considering this proposal. I certify that all Waters of the United States have been identified and delineated on site, and that all jurisdictional wetlands have been delineated in accordance with the Federal Manual for Identifying and Delineating Jurisdictional Wetlands. I grant permission to the agencies responsible for authorization of this work, or their duly authorized representative, to enter the project site for inspection purposes during working hours. I will abide by the conditions of the permit or license if issued and will not begin work without the appropriate authorization. I also certify that the proposed works are consistent with Maryland's Coastal Zone Management Plan. I understand that none of the information contained in the application form is confidential and that I may request that additional required information be considered confidential under applicable laws. I further understand that failure of the landowner to sign the application will result in the application being deemed incomplete.

LANDOWNER MUST SIGN:       DATE: 1/8/07

**WHERE TO MAIL APPLICATION**

Maryland Department of the Environment  
Water Management Administration  
Regulatory Services Coordination Office  
1800 Washington Boulevard, Suite 430  
Baltimore, Maryland 21230  
Telephone: (410) 537-3762  
1-800-876-0200

**BEFORE YOU MAIL... DON'T FORGET...**

- **SIGN AND DATE THE APPLICATION. THE LANDOWNER MUST SIGN.**
- **FIVE (5) COPIES OF ALL DOCUMENTS (APPLICATION, PLANS, MAPS, REPORTS, ETC.) MUST BE RECEIVED TO BEGIN OUR REVIEW.**