

OKLAHOMA DEPARTMENT OF TRANSPORTATION

SECTION 404 PERMIT APPLICATION FORM FOR STATE PROJECTS

DATE: _____

Project No.:		J/P:		Facility:		County:	
Description:							
Let Date:		Division:		Programmed Construction Project Cost:			

Sta or Str. No.	Location			Waterbody	Type	Description		Calculations			
	Latitude	Longitude	Legal			Critical Resource Water?	Existing Structure/Condition	New Structure	Area acre	Cubic Yards of Fill*	Linear Feet of Impacts
Structure name and Station from plans	Decimal Degrees	Decimal Degrees	Township, Range, Section	Name of Waterbody and if it is a Critical Resource Water	See below	Size, Type, and Condition of Structure	Size and Type of Structure	Area of Fill below OHWM	Cubic Yards of fill	Length of Impacts to Blue Line Stream	Number 1, 2, etc. List note description below

AVOIDANCE AND MINIMIZATION:

Provide a brief explanation describing how impacts to waters of the United States are being avoided and minimized on the project site. Also provide a brief description of how impacts to waters of the United States will be compensated for, or a brief statement explaining why compensatory mitigation should not be required for those impacts.

Types: BP--Bank Protection, CC—Channel Change, Chan--Channel Work, RCB--Reinforced Concrete Box, SB--Span Bridge,** Wet--Wetlands, Misc—Miscellaneous *Only necessary if impacts are over 0.1 acres
 **Wetland Information will be added from the delineation report by ODOT

Notes:

- Number 1, 2, etc. Describe note here
- Note whether the impact is fill or excavation in existing channel
 - Note type of fill (rip rap, drilled shafts, dirt, etc.)
 - Note Ordinary High Water Mark (OHWM) elevation
 - Note any other important information pertaining to the calculations and impacts

FHWA Approved Clearance type: CE: _____ FONSI/EA: _____ EIS: _____ Date: _____ Pending: _____ None: _____

Applicant: Name: Oklahoma Department of Transportation Phone No: (405) 522-0734

Address: 200 Northeast 21st Street, Oklahoma City, OK 73105-3204

Application Prepared By: Name: ODOT Designer or Consultant Name Phone No: _____

Processing Agent: Oklahoma Department of Transportation