

OFFICE OF LAND AND STREAMS
STREAM ACTIVITY APPLICATION

1. Name of Applicant AND/OR Company _____ Date of Application _____
2. Complete Mailing Address of Applicant _____ Billing Address (if different) _____ Telephone Number: _____ Fax: _____ E-Mail Address _____
3. Authorized Agent Information (i.e. contractor employed by landowner) Company _____ Address _____ Telephone Number _____ Fax _____ E-Mail Address _____ PLEASE CHECK (✓) HERE IF YOU WANT APPROVAL SENT TO AGENT: _____
4. Please ✓ the proposed use: Private _____ Public: _____ Commercial: _____ (Personal Use) (Govt Agency) (Business)
5. Name of Waterway (if unnamed or unknown tributary, provide stream it flows into) _____ Decimal Coordinates of Site Location (if applicable) Longitude _____ Latitude _____ _____ County _____ District (taxable) _____ Closest City or Town _____
6. Date activity is proposed to commence: _____ Date activity is expected to be complete: _____

OFFICE OF LAND AND STREAMS
STREAM ACTIVITY APPLICATION

7. Is any portion of the activity for which authorization is sought now complete: Yes ____ No ____
(if the answer is yes please give reasons in Section 8 including month and year the activity was completed)

8. Describe proposed activity, its purpose and intended use after completion. Type of equipment to be used in the stream, amount of material to be dredged (if any), plan for disposing of dredged materials, length of stream/bank to be worked or type and size of structure to be placed in stream. **One copy of a map (topographical or detailed, NOT hand drawn,) showing exact location of work site (enabling Officials to locate site) must accompany this application,** and all other information that may be important to this application.

(if additional space is required, continue on a separate sheet)

OFFICE OF LAND AND STREAMS
STREAM ACTIVITY APPLICATION

9. PLEASE CHECK (✓) THE PROPOSED WORK TO BE DONE (for more than one crossing please use Application Table located on DNR OLS website)

_____ **Pipeline** (see Section 10)

_____ **Water Withdrawals** (see Section 11)

_____ **Bank/Stream Work** (✓ all that apply)

Length _____

_____ Stabilization

_____ Restoration

_____ Dredging/ Clean Out

_____ Grading

_____ Enhancement

_____ Channel Change

_____ **Cables**

Type of Transmission Line _____ Purpose _____

_____ **Culverts** (✓ one of the following)

_____ Temporary

_____ Permanent

Length _____

Diameter/Width _____

_____ **Bridges** (✓ one of the following)

_____ Temporary

_____ Permanent

Length _____

Width _____

_____ **Low Water Fords** Type of ford _____

_____ **Loading/Docking/Mooring**

Facility Name _____ Type of Dock _____

Length of Dock _____ Mile Points _____

_____ **Valley Fill** (completely impedes stream)

Facility Name _____ Length of fill _____

_____ **Rock Fill** (stream still flows)

Facility Name _____ Length of fill _____

_____ **Maintenance Dredging/ Sand and Gravel**

Facility Name _____ Mile Points _____

10. If activity is a pipeline construction (gas, water, sewer) please provide:

Material Pipeline is made of _____

Size of Pipeline _____ Maximum pressure on pipeline _____

Provide the appropriate Line Number and if a Gathering or Well Line provide the A.P.I Well Number:

Transmission _____ Distribution _____ Gathering _____

A.P.I Well Number _____

Well Line _____ Well Name: _____

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11. If activity is a Water Withdrawal please provide:

Estimate of water to be withdrawn per month _____

Pump Rate _____

Specific Purpose for Water Withdrawal _____

If using water for Oil and Gas Fracking purposes, do you have a DEP Water Withdrawal Plan?
_____ Yes _____ No (If answer is no, see DEP Contact information in section 13)

If there are multiple withdrawal sites please use Application Table located on DNR OLS website.

12. Has any agency denied approval for the activity described herein? Yes _____ No _____

(If yes, give reasons in Section 8 and attach a copy of the denial)

13. Below is a list of entities that may require permits, Please list all approvals or certifications required by the other Government agencies for the above-described activity:

Issuing Agency: Corps of Engineers-(304) 399-5353 Type of approval: _____
(412) 395-7155

Identification No: _____ Date of approval: _____

Issuing Agency: County Commission Type of approval: _____
Flood Plain Coordinator

Identification No: _____ Date of approval: _____

Issuing Agency: City Government Type of approval: _____

(if in city limits the county isn't needed) Date of approval: _____

Identification No: _____ Date of approval: _____

Issuing Agency: DEP – (304) 926-0440 Date of approval: _____

Identification No: _____

14. I certify that I am familiar with the information in this application, and that to the best of my knowledge and belief such information is true, complete and accurate.

Signature of Applicant or Agent

Office of Land and Streams
112 California Avenue
Charleston, WV 25305-0004
Phone Number: 304-558-3225
Fax Number: 304-558-6048
Website: <http://www.wvdnr.gov/REM/default.shtm>