



REQUEST FOR BUFFER AUTHORIZATION / NO PRACTICAL ALTERNATIVES DETERMINATION

SUBMITTAL REQUIREMENTS

- **Completed Forms & Documentation:** 1 hardcopy
 - *The [Development Application form](#) (see [Administrative Manual 4.4.1](#))*
 - *This application form*
- **Maps:** 1 hardcopy
 - *Buffer Impact Exhibit(s) (see example exhibit)*
 - *USGS 1:24,000 topo map with site boundaries identified; and*
 - *1970 Wake County soil survey map with site boundaries identified (web soil survey not acceptable)*
- **Application Fee:**
 - *See No Practical Alternatives Determination in the [current fee schedule](#) in the [Administrative Manual 4.6.1](#).*

A. Project Information and Prior Project History		
1. Property Identification		
1a. Property identification no. (PIN & real estate ID):		
1b. Site coordinates (in decimal degrees):	Latitude:	Longitude:
1c. Property size:	acres	
2. Surface Waters		
2a. Name of nearest body of water to proposed project:		
2b. Water Quality Classification of nearest receiving water:		
2c. River basin:		
3. Project Description		
3a. Describe the existing conditions on the site and the general land use in the vicinity of the project at the time of this application:		
3b. List the total estimated linear feet of all existing streams (intermittent and perennial) on the property:		
3c. Explain the purpose of the proposed project:		
3d. Describe the overall project in detail, including the type of equipment to be used:		

4. Jurisdictional Determinations	
4a. Have jurisdictional wetland or stream determinations by the Corps, State, or Town been requested or obtained for this property/ project (including all prior phases) in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown Comments:
4b. If yes, who delineated the jurisdictional areas? Name (if known):	Agency/ Consultant Company: Other:
4c. If yes, list the dates of the Corps jurisdictional determinations or State/Town determinations and attach documentation.	
5. Project History	
5a. Have permits or certifications been requested or obtained for this project (including all prior phases) in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
5b. If yes, explain and detail.	
6. Future Project Plans	
6a. Is this a phased project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6b. If yes, explain.	

B. Proposed Impacts Inventory						
1. Buffer Impacts						
1a. Project is in which protected basin?		<input type="checkbox"/> Neuse <input type="checkbox"/> Jordan				
1b. Individually list all buffer impacts below. If any impacts require mitigation, then you MIUST fill out Section D of this form.						
Buffer impact number – Permanent (P) or Temporary (T)	Reason for impact	Type of impact (exempt, allowable, allowable w/ mitigation)	Stream name	Buffer mitigation required?	Zone 1 impact (sq ft)	Zone 2 impact (sq ft)
B1 <input type="checkbox"/> P <input type="checkbox"/> T				<input type="checkbox"/> Yes <input type="checkbox"/> No		
B2 <input type="checkbox"/> P <input type="checkbox"/> T				<input type="checkbox"/> Yes <input type="checkbox"/> No		
B3 <input type="checkbox"/> P <input type="checkbox"/> T				<input type="checkbox"/> Yes <input type="checkbox"/> No		
B4 <input type="checkbox"/> P <input type="checkbox"/> T				<input type="checkbox"/> Yes <input type="checkbox"/> No		
B5 <input type="checkbox"/> P <input type="checkbox"/> T				<input type="checkbox"/> Yes <input type="checkbox"/> No		
B6 <input type="checkbox"/> P <input type="checkbox"/> T				<input type="checkbox"/> Yes <input type="checkbox"/> No		
Total buffer impacts						
1c. Comments:						

C. Impact Justification and Mitigation				
1. Avoidance and Minimization				
1a. Specifically describe measures taken to avoid or minimize the proposed impacts in designing project.				
1b. Specifically describe measures taken to avoid or minimize the proposed impacts through construction techniques.				
2. Buffer Mitigation				
2a. Will the project result in an impact within a protected riparian buffer that requires buffer mitigation?				<input type="checkbox"/> Yes <input type="checkbox"/> No
2b. If yes, then identify the square feet of impact to each zone of the riparian buffer that requires mitigation and calculate the amount of mitigation required in the table below.				
Zone	Reason for impact	Total impact (square feet)	Multiplier	Required mitigation (square feet)
Zone 1				
Zone 2				
	Total buffer mitigation required:			
2c. If buffer mitigation is required, is payment to a mitigation bank or NC DMS proposed?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
2d. If yes, attach the acceptance letter from the mitigation bank or NC DMS.				
2e. If no, then discuss what type of mitigation is proposed.				
2f. Comments:				

D. Diffuse Flow Plan	
<p>All buffer impacts and high ground impacts require diffuse flow or other form of stormwater treatment. Include a plan that fully documents how diffuse flow will be maintained. If a Level Spreader is proposed, attach a Level Spreader Supplement Form.</p> <p>If due to site constraints, a BMP other than a level spreader is proposed, please provide a plan for stormwater treatment as outlined in Chapter 8 of the NCDEQ Stormwater Design Manual and attach a BMP Supplement Form.</p>	<input type="checkbox"/> Diffuse flow <input type="checkbox"/> Other BMP

E. Supplementary Information	
1. Environmental Documentation	
1a. Does the project involve an expenditure of public (federal/state/local) funds or the use of public (federal/state) land?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1b. If you answered "yes" to the above, does the project require preparation of an environmental document pursuant to the requirements of the National or State (North Carolina) Environmental Policy Act (NEPA/SEPA)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1c. If you answered "yes" to the above, has the document been finalized by the State Clearing House? (If so, attach a copy of the NEPA or SEPA final approval letter.) Comments:	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Violations	
2a. Is the site in violation of DWR Wetland Rules (15A NCAC 02H .0500), Isolated Wetland Rules (15A NCAC 02H .1300), DWR Surface Water or Wetland Standards, or Riparian Buffer Rules (15A NCAC 02B .0200), or any Town Ordinance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2b. Is this an after-the-fact permit application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2c. If you answered "yes" to one or both of the above questions, provide an explanation of the violation(s):	

<hr/> Applicant/Agent's Printed Name	<hr/> Applicant/Agent's Signature <small>(Agent's signature is valid only if an authorization letter from the applicant is provided.)</small>	<hr/> Date
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