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| **Section 401 WQC**  **Wetlands, Lakes, AND Streams**  **Pre-Filing Meeting Request**  State Form 57030 (10-20)  Indiana Department of Environmental Management  Office of Water Quality | Type of Submittal *(Check Appropriate Box):*  Pre-Filing  Early Coordination |
| ***For Agency Use Only:***  IDEM Identification Number: |

*Note: Submission of this Pre-Filing Meeting Request a minimum of thirty (30) days prior to submission of a Section 401 Water Quality Certification Request meets the requirement under 40 CFR Part 121.4. A copy of this request must accompany any Section 401 Water Quality Certification Request for the aforementioned project per 40 CFR Part 121.5.*

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| **NAME AND LOCATION OF PROJECT** | | | | |
| Name of Project | | | | County |
| ProjectAddress *(number and street, city, state, and ZIP code) (if available)* or Brief Narrative Description of Project Location *(cross streets or landmark)* | | | | |
| Latitude (*decimal degrees*) | | | Longitude (*decimal degrees*) | |
| **SITE OWNER OF PROJECT** | | | | |
| Name of Company *(If Applicable)* | | | | |
| Name of Project Site Owner *(An Individual)* | | | Title / Position | |
| Address *(number and street)* | | | | |
| City | | State | | ZIP Code |
| Telephone | FAX | E-Mail Address *(If Available)* | | |
| **CONTACT INFORMATION FOR PROJECT** | | | | |
| Contact Person | | | Name of Company *(If Applicable)* | |
| Affiliation to Project Site Owner | | | | |
| Address *(number and street)* *(if different from above)* | | | | |
| City | | State | | ZIP Code |
| Telephone | FAX | E-Mail Address *(If Available)* | | |
| **PROJECT INFORMATION** | | | | |
| **Project Description (*Describe the proposed project and methods to be used.)*** | | | | |
| **Type of aquatic resource(s) present** | | | | |
| **Wetlands:**  Total Acreage:  Proposed impacts to wetlands *(in acres):*   Proposed mitigation *(if applicable)*: | | | | |
| **Streams:**  Total Linear Feet:       Proposed impacts to streams *(acres and feet)*:       acres and       feet  Proposed mitigation *(acres and feet)*:       acres and       feet | | | | |
| Project Duration | | | | |

*(Continued on Reverse Side)*

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| **SUPPLEMENTAL INFORMATION** | |
| In addition to this form, the following **REQUIRED** information has been included:  A map of the location  Wetland delineation  Verification of the delineation or an Approved Jurisdictional Determination by the U.S. Army Corps of Engineers  Conceptual drawings | |
| **SITE OWNER OF PROJECT RESPONSIBILITY STATEMENT** | |
| I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, that the statements and representations in this notification are true, accurate, and complete.  The project proponent herby certifies that all information contained herein is true, accurate, and complete to the best of my knowledge and belief. I, the project proponent, certify that I have the authority to undertake and will undertake the activities as described in this application. I am aware that there are penalties for submitting false information. I understand that any changes in project design subsequent to IDEM's granting of authorization to discharge to a water of the state are not authorized and I may be subject to civil and criminal penalties for proceeding without proper authorization. I agree to allow representatives of the IDEM to enter and inspect the project site. I understand that the granting of other permits by local, state, or federal agencies does not release me from the requirement of obtaining the authorization requested herein before commencing the project. | |
| Signature of Project Owner | Date *(month, day, year)* |
| Printed Name of Project Owner | |
| **Note:**  Once your pre-certification request has been received, the responsible IDEM project manager will review the information and will be in contact if there are any questions, concerns or the need for an on-site or formal early coordination meeting.  The pre-certification request does not constitute a formal review for a Section 401 Water Quality Certification. However, a dated copy of this request must also be included with your certification request along with the other required elements. Information contained in this request will be used to determine potential project concerns and the requirement for additional information. Should a formal on-site or early coordination meeting be necessary, any formal submission of a 401 WQC application should be delayed until completion of a meeting. | |
| **Form Submittal: *(Electronic submission is preferred.)***   * **Electronic submission:** [**WetlandsProgram@idem.IN.gov**](mailto:WetlandsProgram@idem.IN.gov) * **Mail this form to**:   Indiana Department of Environmental Management  Office of Water Quality, Section 401 WQC  IGCN, Room 1255  100 North Senate Avenue  Indianapolis., IN 46204-2251 | |
| Questions regarding the pre-filing meeting request requirement under Section 401 of the Clean Water Act may be directed to the IDEM Wetlands Project Manager assigned to your county. Project manager information can be found on IDEM’s Section 401 WQC Website (<https://www.in.gov/idem/wetlands>) If you are unable to reach the specific project manager for your county you may call (317) 233-8488 or (800) 451-6027 ext.3-8488.  For information and forms visit: https://www.in.gov/idem/forms.htm.  Information regarding the changes to Section 401 of the Clean Water Act may be found on the U.S. Environmental Protection Agency (EPA) website (<https://www.epa.gov/cwa-401>) | |