Application for Authorization to Utilize Open Water Disposal Site

Application for use of an established site must be for dredged material that meets the approval of federal and state agencies. Please supply all requested information, including answers to all questions. Incomplete applications will not be accepted. Also note you can go to: DNR's Dredged Material Management Program Website for further information and requirements.

1. Name of Company or Person Desired on Permit: ____________________________________________

2. Description: (e.g., Municipal Corporation, Washington State Corporation, Single Individual, etc…)

3. If Port District- Are you the Local Sponsor per WAC 332-30-166?   ☐ Yes  ☐ No

4. Address: _______________________________________________________________________

5. Business Phone: _____________________ Fax: _____________________

6. Name of Agent or Contact Person: _________________________________________________
   a. Name of signature authority and his or her title (person signing final SUA).
       ____________________________________________________________________________

7. US Army Corps of Engineers (ACOE) Permit Number: ________________________________
   • Shoreline Substantial Development Permit Number: _________________________________
   • Ecology’s Water Certification Number: ____________________________________________
   Other Applicable Permits: _________________________________________________________

8. Uniform Business Identifier (UBI): _________________________________________________

9. Volume of Material to be Disposed _________________________________________________ Cubic Yards.
   a. Same volume as reflected in ACOE permit?   ☐ Yes   ☐ No   If not, why?__________________

10. Has material been analyzed for any chemicals of concern per user manual and/or biological effects?
    ☐ Yes      ☐ No
    a. If answered yes, do you have Characterization Report (CR) for project site?   ☐ Yes  ☐ No (If yes, please provide electronic copy).
    b. Is this area within or related to a CERCLA/MTCA site?   ☐ Yes  ☐ No

11. Name of Open Water Disposal Site you wish to utilize: ______________________________

12. Proposed Disposal Site Use Dates (note: takes up to 2 weeks to process SUA. See “Application Request” for details) ________________________________________________
13. Will this be a phased project over more than one dredge season? (July 16—Feb 14) □ Yes □ No
   If yes, total volume and estimated timeframe until completion of entire dredging project (excluding
   maintenance dredging): ____________________________________________________________________________

14. Origin of Material to be Disposed

   ____________________________________________________________________________________________
   / Site Name / Body of Water / Latitude/Longitude /

15. Is this dredged area within or associated with any type of DNR use authorization (PMA, commercial
    lease, easement, license, etc) □ Yes □ No If yes, please provide number: ___________________________

16. If applicable, the Abutting upland parcel number: _______________________________________________

17. Historical Uses of the site, if known?: ___________________________________________________________

18. Permits (other than those listed under no. 6) associated with type of uses on site? If so, what type
    (Ecology, WDFW?): _______________________________________________________________________

19. See Next Page for Permit Fee Schedule.

20. Before this authorization is executed, the applicant agrees to furnish an electronic copy of the
    following documents, listed but not limited to: US Army Corps of Engineers permit, Dept. of Ecology
    Water Quality Certification, Dept. of Fish & Wildlife Hydraulic Project Approval, Shoreline Substantial
    Development Permit or exemption letter. See “Application Requirements” form on webpage listed at
    top of this form.

   I HEREBY CERTIFY THAT I have prepared this application, and to the best of my knowledge, the
   information provided is an accurate and true representation of the facts. Applicant/permittee agrees to
   defend and hold the department and the state of Washington harmless from any and all claims
   suffered or alleged to have suffered on the site or arising out of misstatements or operations by the
   applicant. I further attest that I have the authority to submit this application and to agree with
   conditions of the permit. I understand that all material must be from in-water sources, unless
   otherwise approved by the department, and that no material can be placed on the site until a permit is
   issued by the Washington State Department of Natural Resources. Authorizing by the department for
   use of the site is contingent on the contractor, including the tugboat operator, accurately placing
   material within site target area, removing any debris with upland disposal, and following any other
   conditions imposed in the permit. A minimum non-refundable fee (see Permit Fee Schedule on page
   3) is due upon submission of this Application for Authorization to Utilize Open Water Disposal Site to
   the Department of Natural Resources.

   Dated at _______________________, Washington, this ______ day of _______________ 20______.

   Signed: ____________________________________________________________

FOR OFFICIAL USE ONLY:
Aquatic Resources Division

Disposal App. No. ________________________________

Initials: __________ Date: __________________________
PERMIT FEE SCHEDULE

All disposal sites in Puget Sound and Straits of Juan De Fuca:
Forty-five cents (45¢) per cubic yard. Minimum non-refundable fee is $2,000.00. The minimum nonrefundable fee is due upon submission of this document to the Department of Natural Resources.

Grays Harbor/Willapa Bay Sites:
Ten cents (10¢) per cubic yard. Minimum non-refundable fee is $300.00. The minimum non-refundable fee is due upon submission of this document to the Department of Natural Resources.

Other Fees and Charges:
Damage fee for any material disposed outside the disposal zone, in excess of authorized volume, or in any way not in compliance with the Site Use Authorization granted as a result of this application is five dollars ($5.00) per cubic yard.

______ Initials showing you have read Damage clause.

Remit Payment to:
Department of Natural Resources
Financial Management Division
PO Box 47041
Olympia, WA 98504-7041

In order to identify upland or alternative water disposal sites, the following questions must be answered in writing at the time of application:

1. Are there any upland or in-water disposal sites within ten (10) miles of your proposed operations where the dredged material can be beneficially used for:
   a. Improving a recreational beach for swimming or clamming? ☐ Yes ☐ No
   b. Any other beneficial use? ☐ Yes ☐ No

2. If so, please provide a map of the location that indicates volume to be used at the site.

3. Of the sites identified in No. 1 above, what constraints exist that prevent you from using those sites based on social, economic, and environmental concerns?

4. Have you been directed to dispose of any of the project dredged-materials on an upland site because of environmental concerns? ☐ Yes ☐ No

5. Based on the presence of pollution sources such as storm drains, boat repair yards, marinas, and outfalls, do you think any of these dredged materials may be required to be placed in a confined site because of environmental concerns? ☐ Yes ☐ No

Signed: ____________________________ Date: ____________________________
ATTACHMENT A
PLAN OF OPERATION FOR USE OF OPEN WATER DISPOSAL SITES

Name of Grantee ____________________________________________
Work Telephone ____________________________________________ FAX ____________________
Name of Contractor/Operator __________________________________
Address ____________________________________________________
Work Telephone ____________________________________________ FAX ____________________
Name of On-Site Supervisor __________________________________ Telephone(s) ____________
Dredging Location __________________________ S __ T __ R __ Volume __________ cy_

Equipment: (List that which will actually be used on site or for transporting to site. Indicate vessel name, number, color, size, barge capacity, type, etc. Use attachment if necessary.) Only the equipment and operators identified in this plan can be used at the site. Any changes will require written amendment to this plan and must be accepted by State prior to implementation. ____ initials of on-site Supervisor “Any, changes, no matter how minor”.
Tug(s) ______________________________________________________
Barge(s) (type) ______________________________________________
Other ______________________________________________________
Name(s) of Tug Operator(s) (by vessel) __________________________
Operating Dates and Hours:
Starting Date __________________________ Dredging Hours ____________
Expected End Date __________________________ Dredging Hours ____________
Method for Determining Volume of Disposed Material ____________

Grantees must demonstrate, prior to disposal site use, that they are equipped to use positioning aids as described in the DMMP reports or alternative devices acceptable to DNR. Describe method and equipment that will be used to position barges on the DMMP site:

_____________________________________________________________

This material has been approved for disposal at DMMP open water disposal sites by the DMMP agencies: ☐ Yes ☐ No Date of Suitability Determination ____________

THE STATE MUST BE NOTIFIED 24 HOURS PRIOR TO THE INITIATION OR RESUMPTION OF EACH DREDGING PROJECT THAT REQUIRES USE OF AN OPEN WATER DISPOSAL SITE. THIS NOTIFICATION (leave voice message if no answer) MUST BE MADE TO THE DNR DREDGE MANAGER AT (360) 902-1083.

______ initials of onsite supervisor. I have read and will comply with notification requirements.
All answers and statements are true to the best of my knowledge.
Dated at ____________________, Washington this __________ day of ________________, 20____.
Grantee Signature ___________________________________________

Application Date ______________ Issue Date ___________ Expiration Date ________________