



**RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE
OF WATER RESOURCES - Groundwater and Freshwater Wetlands Protection
FRESHWATER WETLANDS PROGRAM**

235 Promenade Street, Providence, Rhode Island 02908
Telephone: 401-222-6820; Rhode Island Relay 711
www.dem.ri.gov/wetlands

Place Date Stamp Here

**APPLICATION FOR A FRESHWATER WETLANDS
DETERMINATION OR PERMIT**

Application No.:

PART A - APPLICATION TYPE (See Tables 2, 3, and 4 in [250-RICR-150-15-3.8.9](#) for more information)

- Request to Determine the Presence of Jurisdictional Area [\[250-RICR-150-15-3.9.2\]](#) (JADETREC)
- Request to Verify Wetland Edges [\[250-RICR-150-15-3.9.3\]](#) (WETEDGE)
- New Freshwater Wetlands Permit [\[250-RICR-150-15-3.11\]](#) (FWWAPPREC)
 - with Variance (VARREC) **OR**
 - with Joint On-Site Wastewater Treatment System (single-family lot only) (JOINTREC)
- Application for Significant Alteration [\[250-RICR-150-15-3.12\]](#) (SIGAPPREC)
- Permit Modification [\[250-RICR-150-15.3.14.3\]](#) (MODIFY)- Existing Permit #: _____

FEE INFORMATION:

To determine your project type and fee amount, use the [Fee Assistant Tool](#).

Permit Fee Amount:

Check No.:

PART B - APPLICANT INFORMATION AND CERTIFICATION (Note: The applicant must be the owner of the property or easement which is the subject of this application or must be the government agency or entity with power of condemnation over such property or easement):

Name of Applicant/Organization _____ RIDOT PTSID (if applicable)

Name and Title of Organization Representative (if applicable): _____

Applicant's Mailing Address: _____
Street Number and Name or P.O. Box

City/Town

State

Zip Code

Applicant's Email Address: _____ Applicant's Phone Number: _____

CERTIFICATION/AUTHORIZATION OF APPLICANT:

I hereby certify that I have requested and authorized the investigation, compilation, and submission of all of the information, in whatever form, contained in this Application; that I have personally examined and am familiar with the information submitted herein; and that such information is true, accurate, and complete to the best of my knowledge. I hereby authorize RIDEM personnel access to the property ("site") for purposes of observing conditions pertinent to this application and assessing compliance with any permit or determination resulting from this Application; including any sampling, monitoring, or surveying that may be deemed appropriate, consistent with the [RIDEM Administrative Inspection Guidelines](#).

Applicant's Signature _____ Date (mm/dd/yyyy) _____

If more than one property owner is applying, please use the [Supplemental Document: Additional Applicant Information and Certification](#).

PART C - PROPERTY LOCATION SUBJECT TO THIS APPLICATION:

Primary City/Town _____ Street Abutting Site, with Address (if applicable): _____

Nearest Intersecting Street: _____ Distance (in feet) and Direction to Property from nearest street intersection: _____

Tax Assessor's Plat(s) and Lot Number(s): _____ Closest Utility Pole Number: _____

Secondary City/Town (if applicable): _____ Secondary Tax Assessor's Plat(s) and Lot Number(s) (if applicable): _____

Has a Freshwater Wetlands application been previously submitted for this property? No Yes _____
If yes, Previous Permit Application # _____

Have there been previous enforcement actions for this property? No Yes _____
If yes, Previous Enforcement Action File # _____

PART D - PROJECT INFORMATION (Note: The [Interactive GIS Map](#) can provide helpful information for answering some of the below questions)

Project Name (*must be project specific*): _____

Project Type: _____

Within which river buffer zone region is the site located? _____

Urban Region

Project Size:

Region 1

Unit:

Region 2

Will the project alter Freshwater Wetlands? *If yes, provide amount to be altered.*

No

Yes

_____ sq. ft.

Will the project alter Buffer Zone? *If yes, provide amount to be altered.*

No

Yes

_____ sq. ft.

Will the project alter Watercourse? *If yes, provide amount to be altered.*

No

Yes

_____ linear ft.

Is the project located within a Drinking Water Supply Reservoir Watershed (DWSRW)?

No

Yes

Is the project located within a Natural Heritage Area?

No

Yes

Have rare wetland types or rare species been documented?

No

Yes

If the project proposes any of the following, concurrently submit an *Application for Stormwater Construction Permit and Water Quality Certification*

New or increased impervious cover for property other than a single-family home?

No

Yes

Disturbance of more than 10,000 sq. ft. of existing impervious cover?

No

Yes

Fill in any amount of floodplain or alter storm flowage to a river, stream, or wetland on any lot?

No

Yes

Does this project require a variance from the Freshwater Wetlands Standards?

No

Yes

Has a variance from local zoning setbacks been sought? *If yes, submit documentation of outcome.*

No

Yes

Have you participated in a pre-application meeting with RIDEM on this project? *If yes, provide meeting date.*

No

Yes

Provide Date: _____

Is municipal master plan approval required for this property? *If yes, submit a copy of the approval.*

No

Yes

PART E - SITE WORK AFFIDAVIT

- Wetland flags are present on site and are correctly and legibly labeled
- The wetland flag numbers on site correspond to those depicted on the plans
- The wetland flags have been accurately surveyed and depicted on the plans
- The proposed Limit of Disturbance (LOD) and other proposed activities and features have been staked and labeled on site (see § 3.8.6).

I have inspected the subject property and its surroundings and do hereby attest that to the best of my knowledge, all site work performed above has been accurately completed and certified at the time of application submission and prior to RIDEM inspection, in accordance with the [Rules and Regulations Governing the Administration and Enforcement of the Freshwater Wetlands Act, 250-RICR-150-15-3.](#)

PART F - PROFESSIONAL CERTIFICATION

I hereby certify that I have been authorized by the applicant to prepare documentation to be submitted in support of this Application; that such documentation is in accordance with the Rules and Regulations Governing the Administration and Enforcement of the Freshwater Wetlands Act (250-RICR-150-15-3); and that such documentation is true, accurate, and complete to the best of my knowledge.

Note: The Project Manager / Primary Professional should enter their information first.

Name and Title: _____

d/b/a: _____

Email Address: _____

Phone Number: _____

Signature: _____

Date: _____

By checking this box, I attest that I have reviewed and certify the Site Work Affidavit in Part E. I last inspected the property on: _____

Name and Title: _____

d/b/a: _____

Email Address: _____

Phone Number: _____

Signature: _____

Date: _____

By checking this box, I attest that I have reviewed and certify the Site Work Affidavit in Part E. I last inspected the property on: _____

Name and Title: _____

d/b/a: _____

Email Address: _____

Phone Number: _____

Signature: _____

Date: _____

By checking this box, I attest that I have reviewed and certify the Site Work Affidavit in Part E. I last inspected the property on: _____