|  |  |
| --- | --- |
| Date Received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | DWR Use Only: Project # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| **Buffer Determination Request Form** |
| Property Owner Information |
| 1. Owner Information  |
| 1a. Name(s) on Recorded Deed |  |
| 1b. Responsible Party (for LLC) |  |
| 1c. Mailing Address |  |
| 1d. Telephone Number |  | 1e. Email Address |  |
| Address of Property:  |
| Project Description (attach plan if available):  |
|  |
|  |
| **Consultant/Agent Information** |
| 4. Agent/Consultant Information  |
| 4a. Name, Company |  |
| 4b. Mailing address |  |
| 4c. Telephone no. |  | 4d. Email address |  |
| 5. Project and Site Information  |
| 5a. Name of project |  | 5b. County |  |
| 5c. Nearest Named Stream |  | 5d. River Basin |  |
|

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 6. Has anyone from DWR visited the site?  | Y / N |  | Staff Name |  | Date of Visit? |  |

 |
| **Attach a map of the site indicating project boundaries on the USGS 1:24,000 Topo and/or NRCS Soil Survey.** |
|  |
| **Please return form to:** | Rick Trone1628 Mail Service CenterRaleigh, NC 27699-1628Email: rick.trone@ncdenr.gov |  |
|  | Please contact the Raleigh Regional Office at (919) 791-4200 if you have any questions. |