NOTICE TO THE APPLICANT

It is the responsibility of the applicant to submit all required supporting documents to DCRM. DCRM regulations for APC Permits require that the following MUST accompany every application otherwise application will be deemed incomplete and RETURNED. Once completed, a pre-application conference shall be held to discuss the proposed activity and to provide the applicant with information pertaining to the CRM program goals, policies and requirements and to answer questions the applicant may have regarding the CRM program and its requirements.

1. The applicant shall file an original DCRM application with exhibits and attachments and one digital copy thereof.

CRM permit applications shall be filed at the DCRM office in Saipan. Proposed projects on Tinian or Rota may be filed at the respective DCRM Branch office on Tinian or Rota, or may be filed at the DCRM office in Saipan.

Your application will be thoroughly reviewed by DCRM technical advisors. You will be notified if additional information is required to complete this review.

To avoid delays in processing your permit application, you are strongly encouraged to fully provide all necessary information and to adhere to all Coastal Resources Management Program requirements.



Eliceo D. Cabrera Administrator

Commonwealth of the Northern Mariana Islands OFFICE OF THE GOVERNOR

Bureau of Environmental and Coastal Quality

Division of Coastal Resources Management Gualo Rai Center, Suite 305 Lower Gualo Rai Middle Road P.O. Box 501304, Saipan, MP 96950 Tel: (670) 664-8300; Fax: (670) 664-8315 www.dcrm.gov.mp



Janice E. Castro Director, DCRM

MINOR PERMIT APPLICATION

A coastal permit is required to perform work regulated by the provisions of NMIAC § 15-10.

NAME OF PROJECT Received by: Physical location of Project Street Village Island Area(s) of Particular Concern: Project Owner's Name: DBA: Coastal Permit Application No.:	
Physical location of Project Street Village Island Area(s) of Particular Concern:	
Physical location of Project Street Village Island Area(s) of Particular Concern:	
Project Owner's Name: DBA: Coastal Permit Application No.:	
Project Owner's Name: DBA: Coastal Permit Application No.:	
Project Owner's Name: DBA: Coastal Permit Application No.:	
Mailing Address Island Zip Code Date Application Received	
Telephone/Cell No. Email Contact 10-day Deadline Date:	
Name of Contractor or Representative (if any): Mailing Address Date of Receipt:	
Telephone/Cell No. Email Contact Receipt No.:	
Funding Source. Check all that apply. Estimated Project Cost: Amount Paid:	
Individual Duriness CNMI Federal Ferradation	
Individual Business CNMI Federal Foundation	
New	
Amendment	
· ····································	

	List of all permits and licenses which have been received Permit/License Application Date		• •		
3.	List of adjacent property owners: Name Mailing Address		Method of Notification		
2.	Project site is located on: Public Land Private Land				
	A. Island	4. Lot #			
	B. Village	5. Tract #			
	C. District	6. Block #			
).	Name of Owner as indicate	ed on Title Deed or Quitcla	im Deed:		
	Name of Lessor (If app	licable):			
			Date of Lease:		
<u>.</u>		e: Expiration I			
<u> </u>	Effective Date of Lease Total area (square feet, sq	e: Expiration I			
	Effective Date of Lease Total area (square feet, sq	e: Expiration I uare meters, acres, etc.) of	the project site/property:		
	Effective Date of Lease Total area (square feet, sq	e: Expiration I uare meters, acres, etc.) of	the project site/property:		
	• Effective Date of Lease Total area (square feet, sq Briefly describe the current	e: Expiration I uare meters, acres, etc.) of at condition of the project s	the project site/property: ite: asitive area (forest/wildlife		

Minor Permit Application

II.	Description of Project or Proposed Action(s)				
1.	Briefly describe the purpose and nature of the project:				
-					
2.	Will your project include any construction activity? If yes, please check all that apply. Use of heavy equipment Blasting				
	Vegetation clearing/Earthmoving Construction of new concrete Grading constructures				
	Excavation Other:				
	Backfilling. Total cy: Soil testing/boring				
	Demolition				
3.	Will toilet facilities be provided at the project site?				
	Yes Explain what type:				
	No Explain where will personnel be using the toilet facilities?				
4.	If applicable, what is the approximate distance of the project's property boundary and project's footprint to the High Tide Line of the ocean or the edge of the cliff line?				
5.	Total area to be developed (square feet, square meters, acres, etc.) at the project site:				
6.	To avoid, minimize, or mitigate the project's negative impacts to coastal resources, please briefly describe proposed management measures to be implement before, during, and after the proposed activities or actions:				
7.	Project's anticipated time frame:				
	Start Date: Completion Date:				

CERTIFICATION OF TRUTH

I certify that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines of up to \$10,000.00 per day per violation.

By Applicant/Owner: (Proof of ownership OR legal authority required)							
Print Name	Title						
Signature	 						

LETTER OF AUTHORIZATIONBy signing this letter of authorization, I am certifying that the individual listed below is authorized

to act on my behalf on matters pertaining to DCI representative is authorized to perform on my be Receive and review documents/permit	
☐ Attend meetings at DCRM's request	
☐ Make decisions during meetings	
☐ Request follow ups or permit inquiries	
☐ Sign permit application form(s)	
☐ Other:	
By Applicant/Owner: (Proof of ownership OR leg	nal authority required)
Print Name	Title
Signature	Date
**************************************) ************************************
The authorized representative understands the a	above conditions and agrees to be responsible
for ensuring his/her client's compliance.	
Authorized Representative: (Copy of valid Identi	fication card required)
Name of Authorized Representative	Name of Company
Signature of Authorized Representative	 Date

CRM PERMIT FEE SCHEDULE

CRM permit application shall be accompanied by a non-refundable CRM permit application and administrative fee in accordance with the following fee schedule, by check made payable to CNMI Treasurer (CRM Rules and Regulations, NMIAC § 15-10-205 (h)).

- A. For APC or Temporary Permit Applications
 - (1) No fee for government agencies engaging in government projects.
 - (2) \$25.00 fee for temporary permits unless waived by the DCRM Director.
 - (3) \$200.00 fee for APC or Minor development permits. As provided below, a "De Minimis APC Waiver" may be requested and a minor APC permit fee reduction may be granted at the discretion of the DCRM Director.
 - (i) "De Minimis Fee Waiver" Request: When an applicant for a Minor APC permit has substantial evidence that the proposed activity or action will have no direct or cumulative impact on coastal resources, a "De Minimis APC Fee Waiver" may be requested in writing through the permitting office. This request must clearly state the reason(s) why the proposed activity will be "de minimis" in nature, and include a request for a reduction of up to 50% of APC permitting fees for commercial actions and 100% of APC permitting fees for mitigation, restoration, or non-commercial actions.
 - (ii) Review of "De Minimis Fee Waiver" Requests: Such requests must be submitted to the Director with the Permit Manager copied. Permitting staff will review such requests to ensure accurate environmental information has been provided, and the Permit Manager will submit a recommendation to the Director to approve or deny the waiver request within ten working days of receipt of the request at the Saipan DCRM office. The Director may deny or grant the waiver request, or grant the request with restrictions, conditions, or modifications at their discretion. If a waiver is granted, the Director shall issue a letter to the applicant detailing what, if any, restrictions the waiver is conditioned upon, and a copy of this letter will be retained in the permit file. Any deviation of scope of activities of the subject project will be treated as unpermitted for the purposes of enforcement action, if necessary, as detailed in § 15-10-900. Submission of a "De Minimis APC Fee Waiver" request shall stop the clock on review of the submitted APC permit. If the waiver request is denied, the review period will be restarted upon the date of the issuance of the denial letter.

STATEMENT OF DISCLOSURE AND APPLICANT'S AGREEMENT TO PERMIT FEES

The applicant agrees that all fees, which must be fully paid to the CNMI Treasury and a copy of the receipt be submitted to DCRM, are based upon representations made to DCRM. If after submission of this fee and that DCRM determines that an error has been made by either the applicant's submission or at the time a fee was determined, the applicant understands that additional fees may be assessed by DCRM. These fees must be paid prior to the submission of any permit application to DCRM.

The applicant understands the above conditions and agrees to comply.					
Print Name	Title	_			
Signature					