U.S. Army Corps of Engineers (USACE)

APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT

For use of this form, see 33 CFR 325. The proponent agency is CECW-CO-R.

Form Approved -OMB No. 0710-0003 Expires: 2027-03-31

The public reporting burden for this collection of information, OMB Control Number 0710-0003, is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR APPLICATION TO THE ABOVE EMAIL.

PRIVACY ACT STATEMENT

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned. System of Record Notice (SORN). The information received is entered into our permit tracking database and a SORN has been completed (SORN #A1145b) and may be accessed at the following website: http://dpcid.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx

and may be detected at the tenering made.									
(ITEMS 1 THRU 4 TO BE FILLED BY THE CORPS)									
1. APPLICATION NO. 2. FIELD OFFICE CODE			3. DATE RECEIVED	4. DATE APPLICATION COMPLETE					
	(ITEMS BELOW TO BE	FILLED BY AP	PLICANT)						
5. APPLICANT'S NAME			8. AUTHORIZED AGENT'S NAME AND TITLE (agent is not required)						
First - Robin Middle -	Last - Gomez	First - James	Middle -	Last - Austin					
Company - City of Madeira Beach			Company - Aptim						
E-mail Address - rgomez@madeirabeachfl.gov			E-mail Address - james.austin@aptim.com						
6. APPLICANT'S ADDRESS:			9. AGENT'S ADDRESS:						
Address- 300 Municipal Drive			Address- 6401 Congress Avenue, Suite 140						
City - Madeira Beach State - FL	Zip - 33708 Country - US	City - Boca I	Raton State - FI	Zip - 33487 Country - US					
7. APPLICANT'S PHONE NOs. w/AREA CODE			10. AGENTS PHONE NOs. w/AREA CODE						
a. Residence b. Business 7275808014 7273919951 ext 2	c. Fax 27	a. Residence 9042527401	b. Business 5613613150						
STATEMENT OF AUTHORIZATION									
11. I hereby authorize, James Austin to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application. SIGNATURE OF APPLICANT DATE									
NAME, LOCATION, AND DESCRIPTION OF PROJECT OR ACTIVITY									
12. PROJECT NAME OR TITLE (see instructions) Johns Pass Dredging Project									
13. NAME OF WATERBODY, IF KNOWN (if applicable)			14. PROJECT STREET ADDRESS (if applicable)						
Johns Pass, Boca Ciega Bay Aquatic Preserve, Pinellas County Aquatic Preserve		Address 12850 Gulf Ln							
15. LOCATION OF PROJECT			City - Madeira Beach State- FI Zip- 33708						
Latitude: •N 27.784449° Lon	gitude: •W -82.782179	City - Made	ira Beach State- F	L Zip- 33706					
16. OTHER LOCATION DESCRIPTIONS, IF KNOWN (see instructions)									
State Tax Parcel ID 15-31-15-58320-002-0050; 15-31-15-00000-420-0100 Municipality City of Madeira Beach									
Section - 15 Township	o- 31	Range							

17. DIRECTIONS TO THE SITE From the intersection of 275 and 5th Avenue North in St. Petersburg, head west on 5th Avenue North for 0.9 miles. Then take Pasadena Avenue North to Central Avenue North. Continue on Central Avenue North and take Treasure Island Causeway to Gulf Boulevard. Head north on Gulf Boulevard for approximately 1.3 miles then take 129th Avenue West into the City of Madeira Beach parking lot. The project site will be in the water of Johns Pass to the south east of the parking lot.								
oject, include all features) nt #1) and Permit Drawings (Attachment #2)								
on or purpose of the project, see instructions) at $\#1$).								
E BLOCKS 20-23 IF DREDGED AND/OR FILL MATE	ERIAL IS TO BE DISCHARGED							
ed and the Amount of Each Type in Cubic Yards:								
Type Amount in Cubic Yards	Type Amount in Cubic Yards							
Amount in Cubic Tards								
N/A	N/A							
	forth. Continue on Central Avenue North and taximately 1.3 miles then take 129th Avenue Wests to the south east of the parking lot. Diject, include all features) Int #1) and Permit Drawings (Attachment #2) The property of the project, see instructions) Int #1). EBLOCKS 20-23 IF DREDGED AND/OR FILL MATER and and the Amount of Each Type in Cubic Yards:							

24. Is Any Portion of the Work Already Complete? Yes No IF YES, DESCRIBE THE COMPLETED WORK								
25. Addresses of Adjoining	ng Property Owners, Lesse	es, Etc., Whose Property	Adjoins the Waterbody (if me	ore than can be entered here, please	attach a supplemental list).			
a. Address- See Maili	ing List (Attachmen	t #5).						
City -	ity -		State -					
b. Address-								
City -		State -		Zip -				
c, Address-								
c. Address-								
City -		State -	State -					
d. Address-								
City -		State -		Zip -				
e. Address-								
City -		State -		Zip -				
26. List of Other Certifica	tes or Approvals/Denials re		I, State, or Local Agencies t	for Work Described in This A	Application.			
AGENCY	TYPE APPROVAL*	IDENTIFICATION NUMBER	DATE APPLIED	DATE APPROVED	DATE DENIED			
FDEP	ERP	TBD	_ TBD	TBD	TBD			
			_	_	_			
			_	_				
			_	_				
27. Application is hereby	restricted to zoning, building made for permit or permits	to authorize the work des	cribed in this application. I	certify that this information	in this application is			
complete and accurate. I applicant.	further certify that I posses	s the authority to undertak		n or am acting as the duly a				
Re)S	OF APPLICANT	7-424 DATE	Austin, James Digitally signed by Austin, James Date: 2024.06.28 11:52:53 -04'00' SIGNATURE OF AGENT DATE 6/28/2024					
				(applicant) or it may be s				
	statement in block 11 ha							
18 U.S.C. Section 100° knowingly and willfully	1 provides that: Whoeve falsifies, conceals, or co	r, in any manner within vers up any trick, schei	the jurisdiction of any deme, or disguises a mater	epartment or agency of the rial fact or makes any fals	ne United States se, fictitious or fraudulent			

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statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent

statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five years or both.