PASPGP-5 PERMIT COMPLIANCE, SELF-CERTIFICATION FORM

Project Name:                County:                
PADEP Permit No:             Date of Issuance:                
Corps Permit Number:         Date of Issuance:                

In accordance with the compliance certification condition of your PASPGP-5 authorization, you are required to complete and sign this certification form and return it to the appropriate Corps of Engineers District in which the work is located. This can be done either by mailing to the below address, or through electronic submission to the e-mail address below.

☐ U.S. Army Corps of Engineers Philadelphia District
  Regulatory Branch
  Wanamaker Building
  100 Penn Square East
  Philadelphia, PA 19107-3390  

or

NAPREGULATORY@usace.army.mil

☐ U.S. Army Corps of Engineers Baltimore District
  Regulatory Branch
  1631 South Atherton Street
  Suite 101
  State College, PA 16801-6260  

or

NAB-Regulatory@usace.army.mil

☐ U.S. Army Corps of Engineers Pittsburgh District
  Regulatory Branch
  Federal Building, 20th Floor
  1000 Liberty Avenue
  Pittsburgh, PA 15222-4186  

or

Regulatory.permits@usace.army.mil

Please note that the permitted activity is subject to compliance inspections by U.S. Army Corps of Engineers representatives. As a condition of this permit, failure to return this notification form, provide the required information below, or to perform the authorized work in compliance with the permit, can result in suspension, modification or revocation of your authorization in accordance with 33 CFR Part 325.7 and/or administrative, civil, and/or criminal penalties, in accordance with 33 CFR part 326.

Please provide the following information:

1. Date authorized work commenced: ________________________________________________

2. Date authorized work completed: ________________________________________________

3. Was all work, including any required mitigation, completed in accordance with your PASPGP-5 authorization?  
   ☐ YES ☐ NO

4. Explain any deviations (use additional sheets if necessary)
   ____________________________________________________________________________
   ____________________________________________________________________________

5. Was compensatory wetland/stream mitigation accomplished through an approved Mitigation Bank and/or In-Lieu fee program?  
   ☐ YES ☐ NO (if YES, attach proof of transaction, if NO complete Number 6 and 7 below).

6. Was permittee compensatory wetland and/or stream mitigation required?  ☐ YES ☐ NO  If YES, was the required compensatory mitigation completed in accordance with the permit and mitigation plan requirements?  ☐ YES ☐ NO

7. Attach labeled color photographs showing completed work including any mitigation area(s).

I hereby certify that, except as noted above, that all work, including mitigation, has been completed in accordance with the terms and conditions, including special conditions of the above referenced permit.

(Permittee Signature):                (Telephone Number):

(Address):                (Email):

________________________________________________________________________

5 October 2018