

**Project Information:** 

## GENERAL PERMIT ACTIVITY REQUEST

Notice to Applicant: If you haven't yet reached out to a COT GM Engineer, we require this prior to applying for an activity request.

Drainat Maras							
riojeci Name: _							
Description of V	Work:						
Description of I	Location:						
Please upda	ate below	if any informat	ion has chan	iged:			
Agent's Information:				Applicant's Information (department/agency):			
Name:				Name:			
Mail Address:				Mail Address:			
Telephone #:	City	State Fax #:		Telephone #:	City	State Fax #:	Zip
E Mail A JJ				E M-11 A JJ			
E-Mail Address:  Agency Project				E-Mail Address:  Other Contact I		licable)•	
Name:				Name:		iicabicj.	
Mail Address:				Mail Address:			
	City	State	Zip		City	State	Zip
Telephone #:	-	Fax #:		Telephone #:		Fax #:	
E-Mail Address:	:			E-Mail Address:			

Please email this completed form to: <u>GMLUESIntake@talgov.com</u>.