



**US Army Corps
of Engineers**®
New England District

V: Self-Verification Notification Form

(for all tidal and non-tidal projects subject to Corps jurisdiction)

Complete **all** fields (write “none” if applicable) below or use the fillable form at www.nae.usace.army.mil/missions/regulatory/state-general-permits/massachusetts-general-permit. Before work within Corps jurisdiction commences, and unless otherwise specified, email this form, a location map, and project plans drawn to scale and not larger than 11” x 17”, to cenae-r@usace.army.mil, (978) 318-8303 (fax), or “Regulatory Division, U.S. Army Corps of Engineers, New England District, 696 Virginia Road, Concord, MA 01742-2751”. The Corps will acknowledge receipt of this form in writing. Please call (978) 318-8338 with questions.

Permittee: _____
Address, City, State & Zip: _____
Phone(s) and Email: _____

Contractor (write none if same as permittee): _____
Address, City, State & Zip: _____
Phone(s) and Email: _____

Prior Corps File or Permit Numbers(s): _____
Project Location (provide detailed description if necessary): _____

Address, City, State & Zip: _____
Latitude/Longitude Coordinates (if address doesn't exist): _____
Waterway Name: _____

Work will be done under the following activity(s) in Section III, Eligible Activities (check all that apply):

- | | | | | | |
|--------|--------|---------|---------|---------|---------|
| 1_____ | 5_____ | 9_____ | 13_____ | 17_____ | 21_____ |
| 2_____ | 6_____ | 10_____ | 14_____ | 18_____ | 22_____ |
| 3_____ | 7_____ | 11_____ | 15_____ | 19_____ | 23_____ |
| 4_____ | 8_____ | 12_____ | 16_____ | 20_____ | |

Project Purpose: _____

Work Description: _____

(continued on next page)

Aggregate total wetland impact area: temporary _____ SF permanent _____ SF
Aggregate total waterway impact area: temporary _____ SF permanent _____ SF
Aggregate total area of structures (e.g., floats, pile-supported structures) temporary _____ SF permanent _____ SF

Does your project include any indirect or secondary impacts? (See General Condition 3.)

Yes _____ No _____

If yes, describe here: _____

Proposed Work Dates: Start: _____ Finish: _____

Your name/signature below, as permittee, confirms that: a) your project meets the self-verification criteria; and b) you accept and agree to comply with the applicable terms and conditions in the General Permits for Massachusetts.

Permittee Printed Name: _____

Permittee Signature: _____ Date: _____