

Work Description:

(Please provide all requested information for each proposed structure)

Structure Type	Number	Length (sq. ft.)	Width (sq. ft.)	Area (sq. ft.)	Height Above MLW (ft.)	Maximum Extent Channelward (ft.)
Pier	n/a					
Platform (Fixed <input type="checkbox"/> or Floating <input type="checkbox"/> )	n/a					
Finger Pier ( <i>Max 2</i> )	1					
	2					
Pile(s) ( <i>Max 6</i> )		n/a	n/a	n/a	n/a	
Osprey Pole(s) ( <i>Max 2</i> )		n/a	n/a	n/a	n/a	
Hoist/Lift ( <i>including support piles; maximum of 6 lifts total with no more than 4 boat lifts</i> )	1 <input type="checkbox"/>	Boat or PWC			n/a	n/a
	2 <input type="checkbox"/>	Boat or PWC			n/a	n/a
	3 <input type="checkbox"/>	Boat or PWC			n/a	n/a
	4 <input type="checkbox"/>	Boat or PWC			n/a	n/a
	5 <input type="checkbox"/>	PWC			n/a	n/a
	6 <input type="checkbox"/>	PWC			n/a	n/a

**I have read and understand the criteria set forth in this XPR Request Form and that my project will be completed in accordance with the conditions set forth herein and as described in the JPA. I certify that the information on this form and on the attached plans and specifications is true, accurate, and complete to the best of my knowledge and belief. I will abide by the conditions of all permit(s) or license(s) if issued and will not begin work without the appropriate authorization.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_