

Floodway**	
Is there work within a floodway (mapped or unmapped, including floodway fringe) below BFE?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Complete if 'yes' to previous question.	Floodway Name _____ _____ sq mi
If drainage area is <1 sq mile, does work laterally encroach into a floodway >1 sq mile? (e.g. small UNT but located within floodway of larger river like White River)	Yes <input type="checkbox"/> No <input type="checkbox"/> Lateral Floodway Name _____
County Regulated Drain	
Is a regulated drain impacted?	Yes <input type="checkbox"/> No <input type="checkbox"/> Drain Name _____
Navigable Waterways	
Does the project impact a USACE Section 10 waterway?	Yes <input type="checkbox"/> No <input type="checkbox"/> Waterway Name _____
Does the project impact a US Coast Guard Section 9 waterway?	Yes <input type="checkbox"/> No <input type="checkbox"/> Waterway Name _____
Levee and Civil Works	
Does the project impact a levee or any other USACE or local civil works project?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stormwater	
Will there be >1 acre of soil disturbance?	Yes <input type="checkbox"/> No <input type="checkbox"/> If YES , complete the INDOT Stormwater Permit Questionnaire and send it to CSGP@indot.in.gov

* Note: Isolated wetland requires a USACE Approved JD and IDEM Waters of the State Determination. If that is not the case, all wetland impacts should be considered WOTUS.

** If there are multiple floodways in the project area, see Attachment 1 at the end of this document. If no additional floodways are in the project area, please remove Attachment 1 when completing the PPD.

3. Preliminary Permit Determination to be Completed by EWPSO Staff

This is a **preliminary** permit determination based on information presented at the time of the request. **If scope and plans change the designer should contact central office EWPSO staff for a revised determination.** A final permit determination will be done at the time of permit application submittal and/or any changes to the scope of the project.

Timeline

1. The target permit approval/on-hand date is two (2) weeks prior to Stage 3 submittal.
2. To calculate the first draft permit application submittal to EWPSO, use the following formula. Please note, EWPSO review time is based on the complexity of the project and quality of the draft application.

Stage 3 Date - (EWPSO Review Time + Agency Review Time) = Submittal Date to EWPSO

Regulatory Agency Review Time Frames (varies based on project complexity):

4 months – 401/404 NWP or RGP, County Regulated Drain

3 months – CSGP & 6 weeks for PCSM

6-9 months – 401 IP

9-12 months – CIF

20 months – 404 Standard Permit

▶ **IDEM 401 / USACE 404:** (nViro site name: _____)

- 401 NWP WQC/404 NWP
- 401 WQC/404 RGP
- 401 Individual WQC/404 NWP
- 401 Individual WQC/404 RGP
- 401 Individual WQC /404 Standard Permit (USACE Form 4345)
- 404 PCN to USACE

▶ **IDEM Isolated Wetland:** (nViro site name: _____)

- IDEM State Regulated General Permit (SRGP)
- IDEM Isolated Wetland Individual Permit (IWIP)

▶ **IDNR State Form 42916**

- IDNR Construction in a Floodway (CIF)
- IDNR Other Permits: _____
- Meets Rural Bridge Exemption
- Meets INDOT IDNR MOU

▶ **County Regulated Drain**

- County Regulated Drain Application/Notification

▶ **Other Permits**

- _____

No Waterway Permits Required

Project Notes: (include special considerations such as wildlife crossings or protected species)

EWPSO Reviewer Signature: _____

Date: _____

Attachment 1: Evaluation of Additional Floodplains

If necessary, this page can be duplicated for assessing multiple floodways in a project area.

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Checkboxes below to be completed by EWPSO Staff:

IDNR State Form 42916

- IDNR Construction in a Floodway (CIF)
- IDNR Other Permits: _____
- Meets Rural Bridge Exemption
- Meets INDOT IDNR MOU

Notes:

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Checkboxes below to be completed by EWPSO Staff:

State Form 42916

- IDNR Construction in a Floodway (CIF)
- IDNR Other Permits: _____
- Meets Rural Bridge Exemption
- Meets INDOT IDNR MOU

Notes:

EWPSO Reviewer Signature: _____ **Date:** _____