



Department of the Interior  
U.S. Fish and Wildlife Service  
Federal Fish and Wildlife Permit Application Form

OMB Control No. 1018-0094  
Expires 12/31 2013

[click here for return addresses](#)

Return to: U.S. Fish and Wildlife Service (USFWS)

Type of Activity: Native Endangered and Threatened Species -

Incidental Take Permits Associated with a Habitat Conservation Plan (HCP)

Complete Sections A or B, and C, D, and E of this application. U.S. address may be required in Section C, see instructions for details. See attached instruction pages for information on how to make your application complete and help avoid unnecessary delays.

| A. Complete if applying as an individual |                                 |                             |  |
|--|---------------------------------|-----------------------------|--|
| 1.a. Last name                           | 1.b. First name                 | 1.c. Middle name or initial | 1.d. Suffix  |
| 2. Date of birth (mm/dd/yyyy)            | 3. Social Security No.          | 4. Occupation               | 5. Affiliation/ Doing business as (see instructions) |
| 6.a. Telephone number                    | 6.b. Alternate telephone number | 6.c. Fax number             | 6.d. E-mail address                                  |

| B. Complete if applying on behalf of a business, corporation, public agency, tribe, or institution |  |   |  |
|--|--|---|--|
| 1.a. Name of business, agency, tribe, or institution<br>Edwards Aquifer Authority                  |  | 1.b. Doing business as (dba)<br>N/A               |  |
| 2. Tax identification no.<br>74-6026194  | 3. Description of business, agency, tribe, or institution<br>Groundwater Conservation District |   |  |
| 4.a. Principal officer Last name<br>Dreher   | 4.b. Principal officer First name<br>Karl  | 4.c. Principal officer Middle name/ initial<br>J. | 4.d. Suffix  |
| 5. Principal officer title<br>General Manager  |  | 6. Primary contact<br>General Manager             |  |
| 7.a. Business telephone number<br>210-222-2204   | 7.b. Alternate telephone number<br>800-292-1047  | 7.c. Business fax number<br>210-222-9869          | 7.d. Business e-mail address<br>kdreher@edwardsaquifer.org |

| C. All applicants complete address information  |                  |                                     |                                      |                        |
|---|------------------|-------------------------------------|--------------------------------------|------------------------|
| 1.a. Physical address (Street address; Apartment #, Suite #, or Room #; no P.O. Boxes)<br>1615 N. St. Mary's Street                         |                  |                                     |                                      |                        |
| 1.b. City<br>San Antonio  | 1.c. State<br>TX | 1.d. Zip code/Postal code:<br>78215 | 1.e. County/Province<br>Bexar County | 1.f. Country<br>U.S.A. |
| 2.a. Mailing Address (include if different than physical address; include name of contact person if applicable)<br>Same as physical address |                  |                                     |                                      |                        |
| 2.b. City   | 2.c. State       | 2.d. Zip code/Postal code:          | 2.e. County/Province                 | 2.f. Country           |

| D. All applicants MUST complete   |  |
|---|--|
| 1. Attach check or money order payable to the U.S. FISH AND WILDLIFE SERVICE in the amount indicated on pages 2-3. Federal, tribal, State, and local government agencies, and those acting on behalf of such agencies, are exempt from the processing fee - attach documentation of fee exempt status as outlined in instructions. (50 CFR 13.11(d))  |  |
| 2. Do you currently have or have you ever had any Federal Fish and Wildlife permits?<br>Yes <input type="checkbox"/> If yes, list the number of the most current permit you have held or that you are applying to renew/re-issue. No <input checked="" type="checkbox"/>  |  |
| 3. Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter 1 of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001. |  |
| Signature (in blue ink) of applicant/person responsible for permit (No photocopied or stamped signatures)   | Date of signature (mm/dd/yyyy)<br>01/03/2012 |

Please continue to next page



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| 1.a. Last name                           | 1.b. First name                 | 1.c. Middle name or initial | 1.d. Suffix  |
| 2. Date of birth (mm/dd/yyyy)            | 3. Social Security No.          | 4. Occupation               | 5. Affiliation/ Doing business as (see instructions) |
| 6.a. Telephone number                    | 6.b. Alternate telephone number | 6.c. Fax number             | 6.d. E-mail address                                  |

| B. Complete if applying on behalf of a business, corporation, public agency, tribe, or institution |   |  |   |
|--|---|--|---|
| 1.a. Name of business, agency, tribe, or institution<br>See Attached Sheet                         |   | 1.b. Doing business as (dba)<br>San Antonio Water System   |   |
| 2. Tax identification no.<br>74-2632530  |   | 3. Description of business, agency, tribe, or institution<br>Municipal water, wastewater and reclaimed water utility |   |
| 4.a. Principal officer Last name<br>Puente   | 4.b. Principal officer First name<br>Robert     | 4.c. Principal officer Middle name/ initial<br>R.  | 4.d. Suffix<br>N/A                              |
| 5. Principal officer title<br>President/Chief Executive Officer                                    |   | 6. Primary contact<br>Dr. Calvin Finch, Director -Water Resources  |   |
| 7.a. Business telephone number<br>210-233-3649   | 7.b. Alternate telephone number<br>210-233-3670 | 7.c. Business fax number<br>210-233-5339   | 7.d. Business e-mail address<br>cfinch@saws.org |

| C. All applicants complete address information   |                  |                                     |                               |                     |
|--|------------------|-------------------------------------|-------------------------------|---------------------|
| 1.a. Physical address (Street address; Apartment #, Suite #, or Room #, no P.O. Boxes)<br>2800 US Hwy. 281 North |                  |                                     |                               |                     |
| 1.b. City<br>San Antonio   | 1.c. State<br>TX | 1.d. Zip code/Postal code:<br>78298 | 1.e. County Province<br>Bexar | 1.f. Country<br>USA |
| 2.a. Mailing Address (include if different than physical address; include name of contact person if applicable)  |                  |                                     |                               |                     |
| 2.b. City  | 2.c. State       | 2.d. Zip code/Postal code:          | 2.e. County Province          | 2.f. Country        |

| D. All applicants MUST complete  |  |
|--|--|
| 1. Attach check or money order payable to the U.S. FISH AND WILDLIFE SERVICE in the amount indicated on pages 2-3. Federal, tribal, State, and local government agencies, and those acting on behalf of such agencies, are exempt from the processing fee - attach documentation of fee exempt status as outlined in instructions. (50 CFR 13.11(d))   |  |
| 2. Do you currently have or have you ever had any Federal Fish and Wildlife permits?<br>Yes <input type="checkbox"/> If yes, list the number of the most current permit you have held or that you are applying to renew/re-issue: _____ No <input checked="" type="checkbox"/>   |  |
| 3. Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter 1 of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001 |  |
|  |  |
| Signature (in blue ink) of applicant/person responsible for permit (No photocopied or stamped signatures)  |  |
| Date of signature (mm/dd/yyyy)   |  |

Please continue to next page

SEE Attached Sheet

**Attachment**

**Section B. 1.a Name of business, agency, tribe or institution**

**City of San Antonio By and Through its San Antonio Water System**

**Section D. 2 Do you currently have or have you ever had any Federal Fish and Wildlife permits?**

**Owner of a tract of real property purchased from Forestar (U.S.A.) Real Estate Group, Inc. and used for water storage tank and related infrastructure subject to a Declaration of Restrictions imposed by USFWS Permit Number TE-102437-)**



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**Incidental Take Permits Associated with a Habitat Conservation Plan (HCP)**

Complete Sections A or B, and C, D, and E of this application. U.S. address may be required in Section C, see instructions for details. See attached instruction pages for information on how to make your application complete and help avoid unnecessary delays.

| A. Complete if applying as an individual |                                 |                             |  |
|--|---------------------------------|-----------------------------|--|
| 1.a. Last name                           | 1.b. First name                 | 1.c. Middle name or initial | 1.d. Suffix  |
| 2. Date of birth (mm/dd/yyyy)            | 3. Social Security No.          | 4. Occupation               | 5. Affiliation/ Doing business as (see instructions) |
| 6.a. Telephone number                    | 6.b. Alternate telephone number | 6.c. Fax number             | 6.d. E-mail address                                  |

| B. Complete if applying on behalf of a business, corporation, public agency, tribe, or institution |   |   |  |
|--|---|---|--|
| 1.a. Name of business, agency, tribe, or institution<br>City of New Braunfels                      |   | 1.b. Doing business as (dba)<br>City of New Braunfels |  |
| 2. Tax identification no.<br>1-74-6001774-1  | 3. Description of business, agency, tribe, or institution<br>Municipality |   |  |
| 4.a. Principal officer Last name<br>Morrison   | 4.b. Principal officer First name<br>Michael                              | 4.c. Principal officer Middle name/ initial           | 4.d. Suffix  |
| 5. Principal officer title<br>City Manager   |   | 6. Primary contact<br>Michael Morrison                |  |
| 7.a. Business telephone number<br>830-221-4280   | 7.b. Alternate telephone number   | 7.c. Business fax number<br>830-608-2109              | 7.d. Business e-mail address<br>rmmorrison@nbtexas.org |

| C. All applicants complete address information  |                  |                                     |                               |                               |
|---|------------------|-------------------------------------|-------------------------------|-------------------------------|
| 1.a. Physical address (Street address; Apartment #, Suite #, or Room #, no P.O. Boxes)<br>424 S Castell         |                  |                                     |                               |                               |
| 1.b. City<br>New Braunfels  | 1.c. State<br>TX | 1.d. Zip code/Postal code:<br>78130 | 1.e. County/Province<br>Comal | 1.f. Country<br>United States |
| 2.a. Mailing Address (include if different than physical address; include name of contact person if applicable) |                  |                                     |                               |                               |
| 2.b. City   | 2.c. State       | 2.d. Zip code/Postal code:          | 2.e. County/Province          | 2.f. Country                  |

| D. All applicants MUST complete   |  |
|---|--|
| 1. Attach check or money order payable to the U.S. FISH AND WILDLIFE SERVICE in the amount indicated on pages 2-3. Federal, tribal, State, and local government agencies, and those acting on behalf of such agencies, are exempt from the processing fee - attach documentation of fee exempt status as outlined in instructions. (50 CFR 13.11(d))  |  |
| 2. Do you currently have or have you ever had any Federal Fish and Wildlife permits?<br>Yes <input checked="" type="checkbox"/> If yes, list the number of the most current permit you have held or that you are applying to renew/re-issue: TE059141-0   | No <input type="checkbox"/>                  |
| 3. Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter 1 of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001. |  |
| Signature (in blue ink) of applicant/person responsible for permit (No photocopied or stamped signatures)   | Date of signature (mm/dd/yyyy)<br>12/28/2011 |

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| A. Complete if applying as an individual |                                 |                             |  |
|--|---------------------------------|-----------------------------|--|
| 1.a. Last name                           | 1.b. First name                 | 1.c. Middle name or initial | 1.d. Suffix  |
| 2. Date of birth (mm dd/yyyy)            | 3. Social Security No.          | 4. Occupation               | 5. Affiliation/ Doing business as (see instructions) |
| 6.a. Telephone number                    | 6.b. Alternate telephone number | 6.c. Fax number             | 6.d. E-mail address                                  |

| B. Complete if applying on behalf of a business, corporation, public agency, tribe, or institution |  |  |   |
|--|--|--|---|
| 1.a. Name of business, agency, tribe, or institution<br>City of San Marcos                         |  | 1.b. Doing business as (dba)<br>N/A  |   |
| 2. Tax identification no.<br>74-6002238  |  | 3. Description of business, agency, tribe, or institution<br>City Government |   |
| 4.a. Principal officer Last name<br>Nuse   |  | 4.b. Principal officer First name<br>James                                   | 4.c. Principal officer Middle name- initial<br>R. |
| 4.d. Suffix<br>Mr.   |  | 5. Principal officer title<br>City Manager                                   |   |
| 6. Primary contact<br>Melani Howard  |  | 7.a. Business telephone number<br>512-393-8448                               |   |
| 7.b. Alternate telephone number<br>512-738-7313  | 7.c. Business fax number<br>512-353-7273 | 7.d. Business e-mail address<br>mhoward@sanmarcostx.gov                      |   |

| C. All applicants complete address information  |  |                  |                                     |                              |                     |
|---|--|------------------|-------------------------------------|------------------------------|---------------------|
| 1.a. Physical address (Street address; Apartment #, Suite #, or Room #; no P.O. Boxes)<br>630 East Hopkins      |  |                  |                                     |                              |                     |
| 1.b. City<br>San Marcos   |  | 1.c. State<br>TX | 1.d. Zip code/Postal code:<br>78629 | 1.e. County/Province<br>Hays | 1.f. Country<br>USA |
| 2.a. Mailing Address (include if different than physical address; include name of contact person if applicable) |  |                  |                                     |                              |                     |
| 2.b. City   |  | 2.c. State       | 2.d. Zip code/Postal code:          | 2.e. County/Province         | 2.f. Country        |

| D. All applicants MUST complete   |  |
|---|--|
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| <br>Signature (in blue ink) of applicant/person responsible for permit (No photocopied or stamped signatures)  | 12/30/11<br>Date of signature (mm/dd/yyyy) |

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| A. Complete if applying as an individual |                                 |                 |  |             |
|--|---------------------------------|-----------------|--|-------------|
| 1.a. Last name                           |                                 | 1.b. First name | 1.c. Middle name or initial                          | 1.d. Suffix |
| 2. Date of birth (mm/dd/yyyy)            | 3. Social Security No.          | 4. Occupation   | 5. Affiliation. Doing business as (see instructions) |             |
| 6.a. Telephone number                    | 6.b. Alternate telephone number | 6.c. Fax number | 6.d. E-mail address                                  |             |

| B. Complete if applying on behalf of a business, corporation, public agency, tribe, or institution |  |   |   |
|--|--|---|---|
| 1.a. Name of business, agency, tribe, or institution<br>Texas State University-San Marcos          |  | 1.b. Doing business as (dba)  |   |
| 2. Tax identification no.<br>74-6002248  | 3. Description of business, agency, tribe, or institution<br>Public University |   |   |
| 4.a. Principal officer Last name<br>Trauth   | 4.b. Principal officer First name<br>Denise                                    | 4.c. Principal officer Middle name/ initial<br>M                      | 4.d. Suffix<br>Dr.                                |
| 5. Principal officer title<br>President  |  | 6. Primary contact<br>William Nance, Vice President Finance & Support |   |
| 7.a. Business telephone number<br>512/245-2244   | 7.b. Alternate telephone number  | 7.c. Business fax number<br>512/245-2033                              | 7.d. Business e-mail address<br>vpfss@TXSTATE.EDU |

| C. All applicants complete address information  |                  |                                     |                              |                     |  |
|---|------------------|-------------------------------------|------------------------------|---------------------|--|
| 1.a. Physical address (Street address; Apartment #, Suite #, or Room #; no P.O. Boxes)<br>601 University Drive  |                  |                                     |                              |                     |  |
| 1.b. City<br>San Marcos   | 1.c. State<br>Tx | 1.d. Zip code/Postal code:<br>78666 | 1.e. County/Province<br>Hays | 1.f. Country<br>USA |  |
| 2.a. Mailing Address (include if different than physical address; include name of contact person if applicable) |                  |                                     |                              |                     |  |
| 2.b. City   | 2.c. State       | 2.d. Zip code/Postal code:          | 2.e. County/Province         | 2.f. Country        |  |

| D. All applicants MUST complete  |  |
|--|--|
| 1. Attach check or money order payable to the U.S. FISH AND WILDLIFE SERVICE in the amount indicated on pages 2-3. Federal, tribal, State, and local government agencies, and those acting on behalf of such agencies, are exempt from the processing fee. <i>attach documentation of fee exempt status as outlined in instructions. (50 CFR 13.11(d))</i>   |  |
| 2. Do you currently have or have you ever had any Federal Fish and Wildlife permits? <i>VARIOUS INDIVIDUALS AT THE UNIVERSITY HAVE SECTION 10(a)(1)(A) PERMITS</i><br>Yes <input type="checkbox"/> If yes, list the number of the most current permit you have held or that you are applying to renew/re-issue: _____ No <input checked="" type="checkbox"/>   |  |
| 3. Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter 1 of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001.<br><i>Denise M. Trauth</i> <span style="float: right;"><i>01/04/2012</i></span><br>Signature (in blue ink) of applicant/person responsible for permit (No photocopied or stamped signatures) <span style="float: right;">Date of signature (mm/dd/yyyy)</span> |  |

Please continue to next page

**\*\* See page 15 for additional instructions on completing the above form. See page 16 for information on the Paperwork Reduction Act, Privacy Act, and Freedom of Information Act aspects of this application form.**

**Section E. ALL APPLICANTS COMPLETE SECTION E.** Provide the information outlined in Section E. on the following pages. Be as complete and descriptive as possible. Please do not send pages that are over 8.5" x 11", videotapes, or DVDs.

**INCIDENTAL TAKE PERMITS ASSOCIATED WITH A  
HABITAT CONSERVATION PLAN (HCP)**

**Have you obtained all required Federal, tribal, State, county, municipal or foreign government approval to conduct the activity you propose?** Please be aware that there may be other requirements necessary to conduct this activity such as an import permit, collection permit, permission to work on Federal or tribal lands, Federal bird banding permit, Corps of Engineers permits, Environmental Protection Agency NPDES permits, tribal, State, county or municipal permits, etc.

Yes. Provide a copy of the approval(s). List the Federal agency, tribe, State, county, municipality or foreign countries involved and type of document required. Include a copy of these documents with the application.

I have applied. List the Federal agency, tribe, State, county, municipality or foreign countries involved and type of documents required. Provide the reasons why the permits have not been issued

Not required. The proposed activity is not regulated.

**Application Processing Fees**

You may update your name, address, telephone number, fax number, or e-mail address in your current application package on file at any time. These changes are considered an administrative change, and no application processing fee is required. If you wish to make an administrative change, please fill out page 1 and indicate the information that you are updating. Then check the box below, provide your permit number, and send the completed pages 1-2 to the appropriate Regional Office (see attached list).

Administrative change for permit number: \_\_\_\_\_.

If you wish to make changes other than an administrative change, then an application processing fee is required as described below.

The application processing fee for a new Incidental Take permit, or to renew/substantively amend an existing valid permit (*with major changes*) is \$100. If permit amendment (*with minor changes*) is required at a time other than renewal, the processing fee is \$50. For additional information on the application processing fee and the requirements to qualify for a fee exemption, please see the instructions for section D. on page 15.

If the information in your current application package on file has changed in a manner that triggers a substantive amendment or a change not otherwise specified in the permit, then you must apply for a substantive amendment to your valid permit. For example, such major changes may include changes in location, activity, amount or type of take, or species to be covered by the permit. Please contact our Ecological Services Field Office located closest to your proposed activity for technical assistance in making this determination. The contact information for our Ecological Services Field Offices can be found on the U.S. Fish & Wildlife Service's (Service) office directory web page at [http://www.fws.gov/offices/directory\\_listofficemap.html](http://www.fws.gov/offices/directory_listofficemap.html).

Check the appropriate box below and enclose check or money order payable to the *U.S. Fish and Wildlife Service* in the amount of

\$100 [or  fee exempt (attach justification if required)] for a new permit. Use Option I. below to provide the required information.

OR

\$100 [or  fee exempt (attach justification if required)] to **renew or substantively amend** my existing valid permit (*with major changes*) using my current application package on file. Use Options I. and II. below to provide the required information. Please indicate the information that you are changing.

OR

\$100 [or  fee exempt (attach justification if required)] to **renew/re-issue** my existing valid permit (*without changes*) using my current application package on file. Use Option III. below to provide the requested information.

OR

\$50 [or  fee exempt (attach justification if required)] to **amend** my existing valid permit (*with minor changes*) at a time other than permit renewal. Use Options I. and II. below to provide the required information. Please indicate the information that you are changing.

Please check the **type of amendment** you are requesting –

add species (specify) \_\_\_\_\_

add new activity with previously permitted species (specify) \_\_\_\_\_

add a geographic area                       change in personnel

other (specify) \_\_\_\_\_

If this application includes **transfer or succession** of a valid Incidental Take permit, please check the box below:

Transfer or succession of a valid Incidental Take permit associated with a HCP using the current application package on file. No application fee is required.

#### **Application Processing**

**To expedite a final decision on your application, you are urged to coordinate with us as soon as possible for guidance in assembling a complete application package. If you are renewing or amending a valid permit, your complete application package must be received at least 30 days prior to the expiration of the valid permit. The following estimates of application processing time begin with our acceptance of a complete permit application package and do not include any time required for requesting clarification or additional information about your application.**

The time required to process an application for an Incidental Take permit will vary depending on the size, complexity, and impacts of the HCP involved. Procedurally, the most variable factor in application processing is the level of analysis required for the proposed HCP under the National Environmental Policy Act (e.g., whether an application requires preparation of an Environmental Impact Statement, Environmental Assessment, or whether a categorical exclusion applies), although other factors such as public controversy can also affect application processing times. The target processing timeline from when we accept a complete application package to our final decision on a permit application is: up to 3 months for low-effect HCPs (with a 30 day public comment period), 4 to 6 months for HCPs with an Environmental Assessment (with a 60 day public comment period), and up to 12 months for HCPs with a 90-day comment period and/or an Environmental Impact Statement – assuming that the applicant is responsive to the Service's request for information and/or clarification, and the application adequately addresses permit issuance criteria. Although not mandated by law or regulation, these targets are adopted as U.S. Fish & Wildlife Service and National Marine Fisheries Service (NMFS/NOAA Fisheries) policy and all offices are expected to streamline their Incidental Take permit programs, and to meet these targets to the maximum extent practicable.

The information provided in your permit application will be used to evaluate your application for compliance with the Endangered Species Act, its implementing regulations (which may require a 30, 60, or 90 day public comment period), and with U.S. Fish and Wildlife Service policy. Receipt and possession of a permit under the Endangered Species Act should be regarded as a privilege, as we must balance permit issuance with our duties to protect and recover listed species.

Up-to-date annual reports and any other required reports under your valid permit(s) must be on file before a permit will be considered for renewal, re-issuance or amendment.

If your activities may affect species under the authority of the National Marine Fisheries Service (NMFS/NOAA Fisheries), then you may need to obtain a separate permit from that agency. In addition we share jurisdiction with NMFS/NOAA Fisheries for sea turtles (e.g., we evaluate applications for permits to conduct activities impacting sea turtles on land, and NMFS/NOAA Fisheries evaluates applications for permits to conduct activities impacting sea turtles in the marine environment). To apply for a permit to conduct activities with sea turtles in the marine environment or other species under NMFS/NOAA Fisheries jurisdiction, please contact them



## INCIDENTAL TAKE PERMIT APPLICATION INSTRUCTIONS

You have 4 options for providing the required information for an Incidental Take permit application.

**Incidental Take Permit Application: Option I. New Incidental Take Permit & Supplementary Information for Renewal or Amendment of an Existing Valid Permit (With Changes).**

General permit regulations for the U.S. Fish & Wildlife Service can be found at 50 CFR 13. Regulations for an Incidental Take permit under the Endangered Species Act can be found at 50 CFR 17.22(b)(1) for endangered wildlife species and 50 CFR 17.32(b)(1) for threatened wildlife species.

Each landowner who wishes to be covered under a new or amended Incidental Take permit associated with an HCP must sign (in blue ink) and date the Incidental Take Permit Application Certification Notice at the end of this application, unless the landowner will be covered under this U.S. Fish & Wildlife Service Incidental Take permit via another vehicle, such as a certificate of inclusion (50 CFR 13.25(d)). Any change in the language of the Certification Notice must be reviewed by the Department of the Interior, Office of the Solicitor and approved by the U.S. Fish & Wildlife Service. The same person who signs in box D. on page 1 of the application must sign the certification.

If the information in items A. - D. below is already provided in your final HCP (or Implementing Agreement, if applicable), then you do not have to provide it here. Instead, check the box below and use the spaces provided in items A. - D. to indicate the page numbers in your HCP or Implementing Agreement that provide the requested information.

- I am not providing the following information for items A. - D. as part of my Incidental Take permit application, because it is already provided in my final HCP or Implementing Agreement (copy attached or already submitted).

If the requested information in items A. - D. is not provided in your final HCP or final Implementing Agreement, or you are using Option II. to renew or amend your existing valid Incidental Take permit, then attach separate pages for the missing information. In order to assist us in processing your request, please provide the item number (A. 1.a., etc.) of the required information before each of your responses. Thank you.

Please ensure that your final HCP and Implementing Agreement (if applicable) are attached if it has not been previously submitted.

If you have previously submitted a final draft HCP or Implementing Agreement, please indicate the document's date.

Date of final draft HCP \_\_\_\_\_

Date of final draft Implementing Agreement \_\_\_\_\_

Applications for an Incidental Take permit associated with an HCP must provide the following specific information (relevant to the activity) under items A.- D. below in addition to the general information on pages 1-5 of this application.

**A. Identify species and activity:**

1. For a new Incidental Take permit:
  - a. Provide the common and scientific names of the species requested for coverage in the permit and their status (endangered (E), threatened (T), proposed endangered (PE), proposed threatened (PT), candidate for listing (C), or species likely to become a candidate (LC)).
  - b. Provide the number, age, and sex of such species to the extent known.
  - c. Quantify the anticipated effects to their habitat.
  - d. Describe each activity associated with your project that would result in the incidental take of each species.
2. For an amended Incidental Take permit:

- a. Identify the activities and/or species to be added to your valid permit (provide both the scientific, to the most specific taxonomic level, and common names), as well as the species status (see 1.a. above).
- b. Provide the number, age and sex of such species to the extent known.
- c. If any activities requested in this application differ from those in your valid permit, then for each species state the current activity, the requested new activity, and how the new activity will impact each species.
- d. Describe each activity associated with your project that would result in the incidental take of each species.
- e. Quantify any anticipated effects to the habitat of each added species.
- f. Identify activities and or species to be deleted from your valid permit and the reason(s) for the deletion.

Page(s) & source document: HCP: 1a and b -- Section 1.4; 1c -- Chapter 4; 1d -- Chapter 2

**B. Identify location of the proposed activity:**

1. Provide the name of the State, county, tribal land, and the specific location of the proposed activity site(s). Include a formal legal description, section/township/range information, county tax parcel number, local address, or any other identifying property designation that will precisely place the location of the proposed activity site(s). Attach a location map and plat of the project site clearly depicting the project boundaries and the footprint and location of all portions of the property that would be affected by your proposed activities.
2. Provide the total number of acres covered by the HCP \_\_\_\_\_  
 Is this the total acreage of the parcel? (check one)  yes  no
3. Provide the approximate number of acres to be impacted \_\_\_\_\_
4. Provide the approximate number of acres to be protected \_\_\_\_\_
5. Provide a complete description, including timeframes, for implementation of proposed voluntary management activities to enhance, restore, or maintain habitat benefiting federally listed, proposed or candidate species, or other species likely to become candidates. Include schedules for implementing these activities.

Page(s) & source document: HCP: Sections 1.2, 3.3, Figures 1-1 and 1-2.

**C. Describe the proposed activities in the conservation plan:**

You must submit a Habitat Conservation Plan. We strongly encourage you to ensure that your HCP is consistent with the Habitat Conservation Planning Handbook, subsequent Handbook addendums, and current policies in order to minimize delays in evaluating your application. The Handbook and other HCP information is available on the U.S. Fish & Wildlife Service's Endangered Species web page at <http://www.fws.gov/endangered/what-we-do/hcp-overview.html>.

Provide a complete description of activity(ies) or reference the applicable HCP or Implementing Agreement page numbers identifying the subject information.

The HCP must specify:

1. The impact that will likely result from the incidental taking. A discussion of the impact that will likely result from the incidental take must include quantification of any anticipated effects to the habitat of the species sought to be covered by the permit.
2. The steps that will be taken to minimize and mitigate such impacts, the funding that will be available to implement such steps, and the procedures to deal with unforeseen circumstances.
3. The steps that will be taken to monitor and report on such impacts, including a copy of the monitoring plan. We are

authorized to require reports of activities conducted under a permit per the U.S. Fish & Wildlife Service's general permit regulations at 50 CFR 13.45.

4. Alternative actions to such incidental taking that have been considered and the reasons why these alternatives are not proposed for use.
5. The biological goals(s) and objectives for the HCP.
6. The duration requested for the proposed permit.

Page(s) & source document : HCP: #1-Ch 4; #2-Ch 5; #3-Ch 6; # 4-Sect. 1-6; # 5 Sect 4-1; # 6 Sect 1.3.2

**D. Implementing Agreement**

An Implementing Agreement

*is*                      *is not*                      (FWS Regional Office to circle one)

a part of the permit application for a Habitat Conservation Plan.

This Implementing Agreement must be signed at finalization of the HCP. Are you willing to commit to an Implementing Agreement at finalization of the HCP?

Yes, I am willing to commit to an Implementing Agreement. Please submit any unsigned, draft Implementing Agreement that you have prepared with our Field Office.

No, I am not willing to commit to an Implementing Agreement.

**Incidental Take Permit Application**

**Certification Notice**

The same person who signs in box D. on page 1 of the application must sign (in blue ink) the following certification.

By submitting this application and receiving an Incidental Take permit pursuant to Section 10(a)(1)(B) of the Endangered Species Act, I

Karl J. Dreher

\_\_\_\_\_ (print name(s)) attest that I/we own the lands indicated in this application, or have sufficient authority or rights over these lands to implement the measures of the Habitat Conservation Plan (and Implementing Agreement if applicable) covered by the Incidental Take permit. Further, upon receipt of the Incidental Take permit, I/we agree to conduct the activities as specified in the Habitat Conservation Plan (and Implementing Agreement if applicable) according to the terms and conditions of the Incidental Take permit and its supporting documents.

  
\_\_\_\_\_  
signature (in blue ink)

01/03/2012  
\_\_\_\_\_  
date

Karl J. Dreher  
\_\_\_\_\_  
please print name legibly

\_\_\_\_\_  
signature (in blue ink)

\_\_\_\_\_  
date

\_\_\_\_\_  
please print name legibly

**Incidental Take Permit Application**

**Certification Notice**

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By submitting this application and receiving an Incidental Take permit pursuant to Section 10(a)(1)(B) of the Endangered Species Act, I

Robert R. Puente

(print name(s)) attest that I we own the lands

indicated in this application, or have sufficient authority or rights over these lands to implement the measures of the Habitat Conservation Plan (and Implementing Agreement if applicable) covered by the Incidental Take permit. Further, upon receipt of the Incidental Take permit, I/we agree to conduct the activities as specified in the Habitat Conservation Plan (and Implementing Agreement if applicable) according to the terms and conditions of the Incidental Take permit and its supporting documents.

*Robert R. Puente*

*12/29/11*

signature (in blue ink)

date

Robert R. Puente

please print name legibly

signature (in blue ink)

date

please print name legibly

**Incidental Take Permit Application**

**Certification Notice**


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By submitting this application and receiving an Incidental Take permit pursuant to Section 10(a)(1)(B) of the Endangered Species Act, I

Michael Morrison

(print name(s)) attest that I/we own the lands

indicated in this application, or have sufficient authority or rights over these lands to implement the measures of the Habitat Conservation Plan (and Implementing Agreement if applicable) covered by the Incidental Take permit. Further, upon receipt of the Incidental Take permit, I/we agree to conduct the activities as specified in the Habitat Conservation Plan (and Implementing Agreement if applicable) according to the terms and conditions of the Incidental Take permit and its supporting documents.

  
signature (in blue ink)

12/28/2011  
date

Michael Morrison

please print name legibly

\_\_\_\_\_  
signature (in blue ink)

\_\_\_\_\_  
date

\_\_\_\_\_  
please print name legibly

**Incidental Take Permit Application**

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**The same person who signs in box D. on page 1 of the application must sign (in blue ink) the following certification.**

By submitting this application and receiving an Incidental Take permit pursuant to Section 10(a)(1)(B) of the Endangered Species Act, I

James R. Nuse

(print name(s)) attest that I we own the lands indicated in this application, or have sufficient authority or rights over these lands to implement the measures of the Habitat Conservation Plan (and Implementing Agreement if applicable) covered by the Incidental Take permit. Further, upon receipt of the Incidental Take permit, I/we agree to conduct the activities as specified in the Habitat Conservation Plan (and Implementing Agreement if applicable) according to the terms and conditions of the Incidental Take permit and its supporting documents.

  
signature (in blue ink)

12/30/11  
date

James R. Nuse, P.E.

please print name legibly

signature (in blue ink)

date

please print name legibly

**Incidental Take Permit Application**

**Certification Notice**

**The same person who signs in box D. on page 1 of the application must sign (in blue ink) the following certification.**

By submitting this application and receiving an Incidental Take permit pursuant to Section 10(a)(1)(B) of the Endangered Species Act, I

Denise M. Trauth

(print name(s)) attest that I/we own the lands indicated in this application, or have sufficient authority or rights over these lands to implement the measures of the Habitat Conservation Plan (and Implementing Agreement if applicable) covered by the Incidental Take permit. Further, upon receipt of the Incidental Take permit, I/we agree to conduct the activities as specified in the Habitat Conservation Plan (and Implementing Agreement if applicable) according to the terms and conditions of the Incidental Take permit and its supporting documents.

*Denise M. Trauth*  
signature (in blue ink)

*1-4-2012*  
date

Denise M. Trauth

please print name legibly

signature (in blue ink)

date

please print name legibly