



STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL
DIVISION OF WATERSHED STEWARDSHIP

89 Kings Highway
DOVER, DELAWARE 19901

OFFICE OF THE
DIRECTOR

PHONE: (302) 739-9921
FAX: (302) 739-6724

APPLICATION FOR LETTER OF APPROVAL FOR PLACEMENT OF SAND OR FILL

This application form is to be used by individual property owners or condominium owners for requests for placement of sand for the purpose of rebuilding the dune or for the placement of clean fill for the purpose of rebuilding parking areas and driveways. No materials may be placed on the beach without prior approval from the Shoreline and Waterway Management Section

Please answer all questions thoroughly and provide the applicable drawings. Incomplete applications will be returned.

Name of Property Owner: _____

Mailing Address: _____

E-mail : _____

Telephone Numbers: (____) _____ Residence (____) _____ Office

Name of Authorized Agent: _____

Mailing Address: _____

E-mail : _____

Telephone Numbers: (____) _____ Residence (____) _____ Office

Location of proposed work:

Lot(s) Number: _____ Block Number: _____

Street: _____

Subdivision/Community: _____

Tax Map #: _____

Reason for placement of sand or fill?: _____

Delaware's good nature depends on you!

What is the source of the sand or fill material? _____

Who will be conducting the work?:

Name: _____ Telephone Number: _____

What is the volume of sand or fill that will be placed?: _____

What method will be used to deposit the material? Is road approval necessary? (Check with local officials.) _____

Please supply the following information:

1. Copy of deed, lease, sales contract or other document showing legal interest of the property upon which the work is to take place.

- 2. An **8 1/2" X 11"** plan (drawn to scale), indicating:
 - a. Location of existing structures
 - b. Area where sand or fill will be placed.
 - c. Profile view of completed project.

As legal property owner, I (we) accept the legally binding nature of this application for placement of sand or fill and acknowledge the ultimate responsibility of the owner in executing the conditions of the approval. I (we) also understand that any unauthorized additions or modifications of the final approval will be considered a violation of the Letter of Approval for Placement of Sand or Fill and the Regulations Governing Beach Protection and the Use of Beaches and are therefore subject to penalties found in the Beach Preservation Act and the Regulations.

Signature of Property Owner

Date

Statement of Agent Authorization

I hereby designate and authorize _____ to act in my behalf as my agent in the processing of this application for Letter of Approval for Placement of Sand or Fill and to furnish, as requested, supplemental information in support of this application. As legal property owner, I (we) accept the legally binding nature of this application for Letter of Approval for Placement of Sand or Fill and enclosed plans and acknowledge the ultimate responsibility of the owner in executing the conditions of the approval. I also understand that this authorization does not transfer ultimate responsibility for this approval to the agent

Major modifications or subsequent additions of the initial project must be entered as a new application subject to conditions outlined in the Regulations. Copies of the Regulations are available upon request from the Shoreline & Waterway Management Section.

Signature of Property Owner

Date

Application is hereby made for a Letter of Approval for Placement of Sand or Fill in the State of Delaware. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge; such information is correct and complete. I further certify that I am authorized to undertake the proposed activities and I am acting as the duly authorized agent for the applicant.

Signature of Authorized Agent

Date