

**Division of Land Resource Protection  
Federal Consistency Request Form**

**\*Please include a detailed description of the project and schematic/site plan depicting the work along with a comprehensive statement of how the project complies with all applicable Coastal Zone Management rules (NJAC 7:7).**

**1. Site Information:**

Site Address:		City:	State:	Zip:
Site County:		Municipality(ies):		
Site Block:		Lot:		
Site NJ State Plane Coordinates	X:		Y:	
Project Description:				

**2. Applicant Information:**

Applicant Name:		
Email:		
Address:		
City:	State:	Zip:

**3. Property Owner Information:**

Property Owner Name:		
Email:		
Address:		
City:	State:	Zip:

**4. Agent Information (if applicable):**

Agent Name:		
Email:		
Address:		
City:	State:	Zip:

**5. Previous DEP File #(s) (if applicable):**

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**FOR DEP USE ONLY:**

Date Received:	Assigned to:	PI #
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**Select type:**

<input type="checkbox"/>	FC Federal Funding to State/Local Government	<input type="checkbox"/>	FC Federal Agency
<input type="checkbox"/>	FC federal Permit – Unlisted Activity	<input type="checkbox"/>	FC federal Permit – Listed Activity
<input type="checkbox"/>	FC federal License – Unlisted Activity	<input type="checkbox"/>	FC federal License – Listed Activity
<input type="checkbox"/>	FC Request to Review Unlisted	<input type="checkbox"/>	FC Negative Determination
<input type="checkbox"/>	FC Jurisdictional Determination	<input type="checkbox"/>	Federal Consistency