



**CERTIFICATION OF CONSISTENCY WITH WASHINGTON'S
COASTAL ZONE MANAGEMENT PROGRAM FOR
ACTIVITIES FUNDED BY RURAL DEVELOPMENT (USDA/RD)**

Federal Application Number: _____

Applicant: _____

Project Description: _____

(attach site plans, location (county/city), and proximity to waterbody (name)) or JARPA Application

This action under CZMA§307(c)(3) is for a project, which will take place within Washington's coastal zone, or which will affect a land use, water use, or natural resource of the coastal zone. *(The coastal zone includes Clallam, Grays Harbor, Island, Jefferson, King, Kitsap, Mason, Pacific, Pierce, San Juan, Skagit, Snohomish, Thurston, Wahkiakum and Whatcom counties.)*

The project complies with the following enforceable policies of the Coastal Zone Management Program:

1. **Shoreline Management Act:**
 Is outside of SMA jurisdiction
 Applied for shoreline permit # _____ being reviewed by _____
 Has a valid shoreline permit # _____ issued by _____ on _____
 Has received an SMA Exemption # _____ issued by _____ on _____

2. **State Water Quality Requirements:**
 Does not require water quality permits
 Applied for water quality certification
 Has received water quality certification # _____ issued on _____
 Applied for stormwater permit # _____ issued on _____
 Has received stormwater permit # _____ issued on _____

3. **State Air Quality Requirements:**
 Does not require air quality permits
 Applied for Air Quality permit # _____ being reviewed by _____
 Has an Air Quality permit # _____ issued by _____ on _____

4. **State Environmental Policy Act:** SEPA Lead Agency is: _____
 Project is exempt from SEPA
 SEPA checklist submitted date _____
 SEPA decision issued/adopted DNS MDNS EIS Other _____ date _____
 NEPA decision adopted by SEPA # _____ date _____
 Lead agency to satisfy SEPA _____

Public Notice for this proposed project was provided through:

- notice mailed to interested parties using _____ mailing list on _____ (date)
- publication in _____ (newspaper) on _____ (dates)
- other (include dates) _____

Therefore, I certify that this project complies with the enforceable policies of Washington's approved coastal zone management program and will be conducted in a manner consistent with such program.

(Signature) _____ Date _____

USDA, Rural Development concludes this action is consistent to the maximum extent practicable with Washington's Coastal Zone Management Program.

Funds will not be released until all State Agency requirements have been met.

(Signature) _____ Date _____

If you require this publication in an alternate format, please contact the Shorelands and Environmental Assistance Program at 360-407-6096, or TTY (for the speech or hearing impaired) 711 or 800-833-6388.