

Project Name Zoning Permit #		Address		
		Iding Permit #		
EQURIED: In accordance with WES Buffe report with all required information as outlibort shall be stamped by a registered PE,	ned in the Buff	er Standards Ap	pendix A - Submitt	al Requirements. The
OWNER/APPLICANT INFORMATION		MAINTENANCE CONTACT INFORMATION (2-YEAR MAINTENANCE BOND REQUIRED)		
NAME		NAME		
COMPANY		COMPANY		
ADDRESS		ADDRESS		
PHONE		PHONE		
FAX		FAX		
MOBILE		MOBILE		
REQUIRED BUFFER WIDTH		MINIMUM PROPOSED		
REQUIRED BUFFER WIDTH (FT.)		BUFFER WIDTH (FT.)		
REQUIRED BUFFER AREA (SQ. FT.)		TOTAL PROPOSED BUFFER AREA (SQ. FT.)		
ENCROACHMENT AREA (SQ. FT.)			R AREA TO BE D (SQ. FT.)	
AREA OF IMPACT (PERCENTAGE OF TOTAL BUFFER ON SITE)		TOTAL BUFFER AREA TO BE RESTORED (SQ. FT, NEW AND EXISTING)		
will implement the buffer mitigation that I have my site. I agree to maintain all buffer areas on erm maintenance of the buffer areas with futur of maintenance completed to comply with these enforcement actions to bring the site into comp	my site for a mine landowners. It rules. I acknown	nimum of two years agree that I am re wledge that failure	s and agree to make sponsible for monito to adhere to these re	arrangements for long ring and annual reportir
OWNER/APPLICANT SIGNATURE			DATE	
This Darmit Evn	iros within 2 vos	ars of the date of is	SIIO	
This remit Exp	iies wiliiiii z yea	is of the date of is	Suc.	