TO: Casey Leach		
Maryland Department of the Environment		
Water and Science Administration • Wastewater Permits Program		
1800 Washington Boulevard • Baltimore, MD 21230		

CLEAN VESSEL COORDINATED ENVIRONMENTAL REVIEW FORM			
Applicant's Address:		Applicant's Phone Number:	
Project Location (Marina Nan	ne and Address):	Number of Slips to be Served:	
		County in which project is located:	
	Proposed Vessel	Waste Disposal Method	
A. Direct Sewer Connection?		B. Holding Tank?	
If YES: 1) Name of sewage treatm	ent plant:	If YES: 1) Is tank to be used exclusively for vessel waste? YES INO	
2) Local sewer use approval:		 2) Will tank receive marina sanitary wastewater in addition to vessel waste? □YES □ NO 	
Has been obtained (att	·	If YES: Total Daily Volumegallons Proposed size of tank:gallons	
		 3) Will the content of the holding tank(s) be properly disposed off by a certified and licensed waste hauler? □ Yes □ No Name of Waste Hauler:	
APPLICANT'S CERTIFICAT I hereby certify that the abo (Applicant's Signature)		to the best of my knowledge:	
Part II.	Local Hea	ath Review	
Proposed vessel waste receiv Other site-specific wastewate wastewater): Comments:		inent observations regarding disposal of marina sanitary	
(Local Health Signature)	(Date)	(Printed Name, Title)	
Part III.	MDE Finding Regard	ling Proposed Vessel Waste Disposal Method	
Approved Comments: NOTE: This finding pertains and does not constitute a find disposal systems. If use of th	Disap solely to the review of the ling pertaining to any other ne local sewer system thr	e proposed method of collection and disposal for vessel waste er matter such as expansion of marina sanitary wastewater ough direct communication is proposed for vessel waste, roval for sewer use from the appropriate authority.	
(MDE Signature)	(Date)	(Printed Name, Title)	