

MAIL TO: Robert Pudmericky  
 Maryland Department of the Environment  
 Water Management Administration • Industrial and General Permits Division  
 1800 Washington Boulevard • Baltimore, MD 21230

Phone: 410-537-3721  
 FAX: 410-537-4006

**CLEAN VESSEL COORDINATED ENVIRONMENTAL REVIEW FORM**

**PART I. To Be Filled In By State Grant Applicant**

|  |  |
|--|--|
| <u>Applicant Name:</u>                             | <u>Date:</u>                               |
| <u>Applicant's Address:</u>                        | <u>Applicant's Phone Number:</u>           |
| <u>Project Location (Marina Name and Address):</u> | <u>Number of Slips to be Served:</u>       |
|  | <u>County in which project is located:</u> |

**Proposed Vessel Waste Disposal Method**

|   |   |
|---|---|
| <p>A. Direct Sewer Connection? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES:<br/>         1) Name of sewage treatment plant:<br/>         _____</p> <p>2) Local sewer use approval:<br/> <input type="checkbox"/> Has been obtained (attach documentation)<br/> <input type="checkbox"/> Has NOT been obtained.</p> | <p>B. Holding Tank? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES:<br/>         1) Is tank to be used exclusively for vessel waste?<br/> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>2) Will tank receive marina sanitary wastewater in addition to vessel waste?<br/> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES: Total Daily Volume _____ gallons</p> <p>3) Proposed size of tank: _____ gallons</p> <p>4) Will the content of the holding tank(s) be properly disposed off by a certified and licensed waste hauler?<br/> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Name of Waste Hauler: _____</p> |
|---|---|

**APPLICANT'S CERTIFICATION:**  
*I hereby certify that the above information is true to the best of my knowledge:*

.....  
 (Applicant's Signature) (Date)

**Part II. Local Health Review**

Proposed vessel waste receiving facility and disposal method are:  Acceptable  Unacceptable

Other site-specific wastewater issues? (Note any pertinent observations regarding disposal of marina sanitary wastewater):  
 Comments: \_\_\_\_\_

.....  
 (Local Health Signature) (Date) (Printed Name, Title)

**Part III. MDE Finding Regarding Proposed Vessel Waste Disposal Method**

The proposed vessel waste receiving facility and disposal method described under Part I is hereby:

Approved  Disapproved

Comments: \_\_\_\_\_

NOTE: This finding pertains solely to the review of the proposed method of collection and disposal for vessel waste and does not constitute a finding pertaining to any other matter such as expansion of marina sanitary wastewater disposal systems. If use of the local sewer system through direct communication is proposed for vessel waste, applicants are advised of the need to secure local approval for sewer use from the appropriate authority.

.....  
 (MDE Signature) (Date) (Printed Name, Title)

