

Schedule D – Fording

Project Description (Please complete one Schedule for each crossing)

Location

Crossing Name/No: _____

Please mark location on a copy of a topographic map (preferably at 1:50,000 scale) or Google Earth Image and include as a separate attachment with the application.

If including a 1:50,000 Topographic Map, Please Provide:

Map No: _____

Or, UTM Coordinates:

N _____ E _____ NAD _____ ZONE _____

Channel Description

Dimensions: (Please provided a photo and a cross-sectional drawing, if available)

Please provide the following measurements:

top width of channel: _____ m bottom width of channel: _____ m

depth of channel: _____ m normal depth of water: _____ m

Physical Description:

(a) Streambed Material: Clay Sand Gravel Cobble Boulder

(b) Amount of Vegetation: None Sparse Moderate Heavy

Equipment to be used:

Briefly describe how erosion control and stabilization will be carried out:

Briefly describe how site restoration will be carried out:
