



TOWN OF SMITHFIELD

310 Institute Street, PO Box 246, Smithfield, VA 23431

Tel: 1-(757)-365-4200 Fax: 1-(757)-357-9933

www.smithfieldva.gov

WATER QUALITY IMPACT ASSESSMENT (WQIA) APPLICATION

Project Address _____ Tax Parcel ID# (TPIN) _____

Joint Permit Application # (If Applicable): _____ Date of this Application: _____

Owner _____

Owner Address _____

Owner Phone _____ Owner Email _____

Applicant _____

Applicant Address _____

Applicant Phone _____ Applicant Email _____

Project Description _____

(1) What type of vegetation exists at the project site? _____

(2) How much of number one (1) above will be removed as a part of this project (if applicable)? _____

(3) Attach a mitigation plan for number two (2) above, and indicate below the provider of technical advice for the project, to include the mitigation plan:

Shoreline Erosion Advisory Service Virginia Institute of Marine Science Other (Describe Below)

(4) How will the project site be accessed? Land Water

(5) What type of equipment will be used in the 100' Resource Protection Area (RPA)? _____

(6) What materials will be stored in the 100' RPA, and for how long (if applicable)? _____

(7) Which parts of the 100' RPA will be disturbed? Landward 50' Seaward 50' Both

(8) How many square feet of disturbance will result from this project? <2500 ≤ 5000 >5000

(9) How many square feet of development will result from this project? <2500 ≤ 5000 >5000

By signing below, you certify that all components of and attachments to this application are true and inclusive of all details of the proposed project at the property/properties in question, and you certify that all removed vegetation removed from any and all disturbed areas that might result from this project shall be replaced/ restored in accordance with the Riparian Buffers Modification and Mitigation Guidance Manual.

Applicant/Owner Signature _____ Date _____

TOWN STAFF ONLY

WDF/Shoreline Stabilization Minor Major

Zoning Permit # or Zoning Permit Waiver Approval Date for the Project Requiring this WQIA: _____

Conditions/Explanations/Notes _____

Town Staff Signature (for John Settle, Community Development & Planning Director) _____ Date _____