

COMPLIANCE CERTIFICATION

Programmatic General Permit Number: 10

Stream Alteration Number: _____

Corps Project Identification Number: _____
(Corps Use Only)

**Permittee's Name, Address and
Phone Number:** _____

County Location of Permitted Activity: _____

Within 30 days after completion of the activity authorized by this permit, please sign and return this certification to the following email address:

SPKRegulatoryMailbox@usace.army.mil

Please note that your permitted activity is subject to a compliance inspection by a U.S. Army Corps of Engineers' representative. If you fail to comply with the terms and conditions of the permit, your authorization may be suspended, modified or revoked. If you have any questions about this certification, please contact the Corps of Engineers at 801-295-8380.

* * *

I hereby certify that the work authorized by the above-referenced permit, including all the required mitigation, was completed in accordance with the terms and conditions of the permit verification.

Signature of Permittee **Date**