BOTTOM BARRIER INSPECTION REPORT FORM

Permittee Name: _____

Permittee Address: _____

_____

Permit Number: _____ Date: _____

Submit report annually to:

Lakes & Ponds Regulatory Program
1 National Life Drive, Main 2
Montpelier, VT 05620-3522

Or via email to: ANR.WSMDShoreland@vermont.gov

VERMONT DEPARTMENT OF ENVIRONMENTAL CONSERVATION
WATERSHED MANAGEMENT DIVISION
LAKES & PONDS PROGRAM

Date	Operator's Name	Current Location	Action taken/Observation	Square footage removed or relocated (if applicable)
MM/DD/YYYY	Example Entry	Address or Lat/Long	Installed 1,000 square feet – OK	

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Operator's Signature:_____