

CTDEP INLAND FISHERIES DIVISION COORDINATION TRANSMITTAL MEMORANDUM

DOT Project #: _____ **Town:** _____ **Bridge #:** _____
Waterway: _____ **Drainage Basin Name & Number:** _____
Project Description / Scope of work: _____

Initial Coordination

The following information is provided as required:

Plan /submittal date : _____

- ___ Legible location map with project site clearly marked
- ___ Description of scope of work and if developed, pertinent 1/2 scale plans as deemed relevant.
- ___ Area photographs

To be completed by CTDEP Inland Fisheries Division and returned to DOT Environmental Planning Division

- ___ Affect of proposal on our program interests is negligible. No further review is warranted.
- ___ Additional information is required, a list of requested information is attached.
- ___ Comments and recommendations are attached.

____ Initials

____ Date

Structure Type Agreement

The following information is provided as required:

- ___ Copies of previous correspondence from Fisheries Division
- ___ If previous recommendations cannot be incorporated, provide narrative explaining why.
- ___ 1/2 scale plans of pertinent plan sheets including plan view, elevation view, profile and details as deemed relevant.

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- ___ DEP Fisheries agrees to the structure type presented in the plans.
- ___ Comments and recommendations are attached.

____ Initials

____ Date

Final Fisheries Sign-Off