



Lake George Park Commission

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APPLICATION FOR STANDARD ACTIVITY PERMIT (Article 15 Excavation/Fill)

For work below the mean high water level on supporting structures of existing wharfs

- ✓ This form is to be used for **repairs** to or **in kind replacements** of legally existing wharfs only. This office maintains the registration and permit files for wharfs on Lake George. Contact this office for a copy of your authorized dock plans. If you plan to modify your wharf in any way, do not use this form. Instead, contact the Commission or go to the above website for the appropriate dock modification application.
- ✓ There is no fee for an application for a Standard Activity Permit.

1. OWNER <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.				<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> ASSOCIATION			
				<input type="checkbox"/> CORPORATION <input type="checkbox"/> MUNICIPALITY <input type="checkbox"/> AGENCY			
NAME				EMAIL			
CONTACT PERSON IF OWNER IS NOT AN INDIVIDUAL							
MAILING ADDRESS							
CITY			STATE		ZIP CODE		PHONE
2. CONTRACTOR							
NAME				EMAIL			
COMPANY							
MAILING ADDRESS							
CITY			STATE		ZIP CODE		PHONE
3. PROJECT LOCATION							
TOWN <input type="checkbox"/> TICONDEROGA <input type="checkbox"/> DRESDEN		SECTION		BLOCK		LOT	
<input type="checkbox"/> FORT ANN <input type="checkbox"/> HAGUE		STREET					
<input type="checkbox"/> LAKE GEORGE <input type="checkbox"/> PUTNAM							
<input type="checkbox"/> QUEENSBURY <input type="checkbox"/> BOLTON							
LAKE FRONTAGE _____ feet			NUMBER OF WHARFS AND MOORINGS CURRENTLY ON PROPERTY				
according to <input type="checkbox"/> Tax Map			_____ DOCKS		_____ MOORINGS		
<input type="checkbox"/> Survey (attach copy)							
4. PROJECT DESCRIPTION							
This project will <input type="checkbox"/> Repair Cribbing <input type="checkbox"/> Replace Cribbing <input type="checkbox"/> Install new cribbing <input type="checkbox"/> Remove Cribbing							
<input type="checkbox"/> Other (describe)							
*If cribbing is to be replaced it must be brought into compliance with specifications for new cribs, see instructions below.							
WHARF USE <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> PUBLIC							
PROPOSED STARTING DATE _____				PROPOSED COMPLETION DATE _____			
IS ANY PORTION OF THIS ACTIVITY FOR WHICH A PERMIT IS SOUGHT NOW BEGUN OR COMPLETED?							
<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, please explain)							

5. CERTIFICATION

I hereby affirm that the information on this form and all attachments submitted herewith is true to the best of my knowledge and belief.

I hereby consent to the Commission staff working directly with my agent, as designated on page 1 of this form, during the review of this application.

During the processing of this application Lake George Park Commission (LGPC) personnel or their assigns may need to visit this site to inspect, measure, make drawings and/or take photographs. I hereby agree that LGPC staff or their assigns may enter upon and pass through this property in order to inspect the project site or facility, without prior notice, between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday, while the application is pending. In the event that the project site or facility is posted with any form of "posted" or "keep out" notices, or fenced in with an unlocked gate, this permission authorizes LGPC staff or their assigns to disregard such notices or unlocked gates at the time of inspection.

As a condition to the issuance of a permit, the applicant accepts full legal responsibility for all damage, direct and indirect, or whatever nature, and by whomever suffered, arising out of the project described herein and agrees to indemnify and save harmless the State from suits, actions, damages and costs of every name and description resulting from the said project.

SIGNATURE OF OWNER (Note title if signing for a corporation or association)

DATE

PLEASE COMPLETE ALL ITEMS ABOVE AND INCLUDE WITH THIS FORM:

LAKEFRONT PLAN

Attach a to scale site plan (preferably a survey) showing the subject wharf to be repaired and its location on the full lakefront of the subject property. Show the location and configuration (to scale) of any other existing docks, boat houses or moorings that are associated with your property. On your request, we will be happy to provide you with copies of plans of your docks/moorings that we have on file.

DETAILED PLAN OF THE WHARF TO BE REPAIRED

Include all dimensions and show sizes and spacing of cribs to be repaired or new cribs to be installed. New cribs must meet the following specifications:

1. Maximum individual crib dimensions should not exceed 8' X 12'.
2. Spacing between cribs should not be less than 8'.
3. A minimum distance of 6' from the ordinary high water mark to the first crib should be maintained to allow for water circulation at the shore. In areas of very shallow water it may be necessary to allow more space to achieve water circulation behind the first crib. Provide an elevation view for docks proposed with new cribbing which shows the lake bottom.

For all cribs:

Stone used for filling may not be less than 6 inches in diameter and may not come from the lakebed.

Removal of cribs:

Crib rocks and timbers must be completely removed from the lake unless re-used in authorized new cribs. Rocks may not be utilized to stabilize shorelines without authorization.