

**Notice to Navigation Information Sheet**

**CELRP-RG**      **Email: [Regulatory.Permits@usace.army.mil](mailto:Regulatory.Permits@usace.army.mil)**

**Phone 412-395-7154/7155**

Date: \_\_\_\_\_ Received by: \_\_\_\_\_

Navigation number assigned: \_\_\_\_\_

Name \_\_\_\_\_ (contractor/sub-contractor): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Who work is being done for: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Type of work that is being done: \_\_\_\_\_

Location (river/mile point/right or left descending): \_\_\_\_\_

Description of floating plant (boat and name/type of equipment they will use/how many pieces of equipment): \_\_\_\_\_

Monitoring which marine channels at the worksite? \_\_\_\_\_

Location of floating plant during non-working hours: \_\_\_\_\_

Date work will begin: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Work hours (hours per day/days per week): \_\_\_\_\_

**Note: Work can NOT begin sooner than 14 days once NTN is complete.**

PERMIT NUMBER: _____
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