



Appalachian National Scenic Trail

Project Proposal & Review Form



PROJECT INFORMATION

Project Name:		Location	
Category <input type="checkbox"/> New <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Remove/Demo	Prior Planning <input type="checkbox"/> Trail Assessment Year: _____ <input type="checkbox"/> Capital Plan Year: _____ <input type="checkbox"/> Local Mgmt. Plan Year: _____	Proposed Start Date	Trail Club
	Target Finish		Lead Tele: _____ Email: _____
	Regional Office Contact		

Brief Description (remember to also attach a more detailed description of the work to be performed)

SECTION 1

Trail Assessment Deficiencies (list the "AT ID" of all deficiencies that will be addressed – attach list if needed)	Supporting Information <input type="checkbox"/> Detailed Description <input type="checkbox"/> Map <input type="checkbox"/> Flagline <input type="checkbox"/> Pictures of Site <input type="checkbox"/> Project Diagram <input type="checkbox"/> Other _____	Submitted <hr/> Signature _____ Date _____ Print Name: _____
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ATC REGIONAL OFFICE REVIEW

Consultation with RPC Opt-Out <input type="checkbox"/> Completed: _____ (Date) Signature: _____	<div style="border: 1px solid black; padding: 5px;">Received</div>
Environmental Planning & Review Natural Resources Surveyed <input type="checkbox"/> Botanicals <input type="checkbox"/> Wetlands <input type="checkbox"/> T&E Species <input type="checkbox"/> Other _____ By: _____ Date: _____	<div style="border: 1px solid black; padding: 5px; height: 100px;">Notes/Comments:</div>
Cultural Resources Surveyed <input type="checkbox"/> Archeology <input type="checkbox"/> Historic Structures <input type="checkbox"/> Sacred Sites <input type="checkbox"/> Other _____ By: _____ Date: _____	
_____ ATC Regional Director Date	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	

SECTION 2

AGENCY CONSULTATION

<input type="checkbox"/> NPS** _____ <input type="checkbox"/> USFS*** _____ <input type="checkbox"/> State:** _____ <input type="checkbox"/> Municipal:** _____	<div style="border: 1px solid black; padding: 5px;">Received</div>
_____ Agency Official Date	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	

SECTION 3