Grand River Dam AuthorityEcosystems & Lake Management 918-256-0852, P.O. Box 70, Langley, OK 74350 or Email: lakepermits@grda.com

Application for Private Dock Requiring Directional Bearing

FOR GRDA USE ONLY: Reservoir		: UTM Coordinate	UTM CoordinateX _			250.00 Fee Received		
		GRDA Map & Tr	act Number	SMP Classification		Permit Number		
NAME:EMAIL ADDRESS:								
MAILIN	NG ADDRESS	:						
LAKE ADDRESS:					City	State	·	
		Work			City	State Lake Phone No	Zip	
LOCATION OF DOCK: Lake Arm				rm/Cove/Ar	ea			
LEGAL Sec	DESCRIPTIO, T	ON of PROPERTY: CountyN, RE or Su	bdivision			Blk	Lot	
Provi	de The Fo	ollowing:						
1.	Reason for	request for directional bear	ing:					
2.	Length of [Dock Width of	Dock	Numbe	er of slips			
3.	Length of \	Walkway Widt	n of Walkway _					
4.	Perpendicular distance measured from the point where the walkway intersects the 745' PD elevation to the nearest shoreline's 745' PD elevation for Grand Lake is ft.							
5.	Perpendicular distance measured from the point where the walkway intersects the 622' elevation mean sea level (msl) to the nearest shoreline's 622' mean sea level (msl) for Lake Hudson is ft.							
6.	. Walkway anchor point provided by Oklahoma licensed surveyor. UTM Coordinate:							
						Easting (X)	Northing (Y)	
Publi	c Notice I	Requirements:						
	a. Mailing of written notice, via certified mail, return receipt requested to all owners of property within one hundred fifty (150) feet from the outer edge(s) of the proposed dock. Please Note: This is the applicant's responsibility. Domestic Return Receipts (green card) are required as proof of notice or notification to local landowner(s) or homeowner(s). Applicant must return the enclosed notification form signed by all notified parties. GRDA will not post in newspapers or on web site until 'green cards' and notification forms are received by GRDA.							
	b. Publicati	on in newspapers of genera	circulation, inc	luding the c	ounty in whic	th the property is lo	cated.	
	c. Posting on GRDA's web site for a period of thirty (30) days.							
	d. Additional staff requirements:							
	i	Date		Sign	nature			



Notification Form



Applicant's Name:								
Name of Party Notified:								
I/We have been informed	ned of Applicant's proposal and							
have no objections to sam	ne.							
I/We object to Applicant reason:	's proposal for the following							
	Signature							
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Signed notification form must be returned for each person required to be notified of Applicant's proposal.