



Commonwealth of the Northern Mariana Islands

OFFICE OF THE GOVERNOR

Bureau of Environmental and Coastal Quality

DEQ: P.O. Box 501304, DCRM: P.O. Box 10007, Saipan, MP 96950-1304

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www.deq.gov.mp and www.crm.gov.mp



PERMIT NO. \_\_\_\_\_

1. PERMIT TO RECEIVE /HAUL EXCAVATED MATERIAL FOR SMALL FILL

Name of Requestor: \_\_\_\_\_

Address: \_\_\_\_\_ Contact No: \_\_\_\_\_

Location of proposed fill area: \_\_\_\_\_ Estimated Volume: \_\_\_\_\_ (45cy Limit)

Volumes above forty five (45) cubic yards or three (3) truckloads must be applied through a DEQ ONE START Earthmoving & Erosion Control Permit Application.

Do you have a DEQ Earthmoving permit to backfill the area? If yes, submit a copy and indicate the Earthmoving & Erosion Control Permit No.: \_\_\_\_\_

Please be sure to submit a vicinity map along with this application or you may use the backside of this form.

2. AGREEMENT OF INDEMNIFICATION/RELEASE OF CLAIMS

I, \_\_\_\_\_ hereby accept full responsibility to receive and haul excavated material from \_\_\_\_\_

to my property located at \_\_\_\_\_ Lot/Tract # \_\_\_\_\_

for the purpose of \_\_\_\_\_

I will not hold DEQ liable or any Government Agency of the Commonwealth of the Northern Mariana Islands or any Representative(s) thereof for any damages incurred by the use of such material for fill purposes on my property.

In addition, I agree to indemnify and hold harmless BECQ and all Authorized representative of BECQ from liability, personal and/or property, including myself, arising out of the use of such material on my property. I further indemnify and hold harmless BECQ and its representative from any assessment of penalty.

Types of approved materials: Aggregate ( ) Coral ( ) Soil ( ) Sand ( )

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

THIS PERMIT IS HEREBY APPROVED FOR MINIMAL FILL PURPOSES. A COPY OF THE AUTHORIZATION MUST BE KEPT AT THE FILL SITE, ALONG WITH ALL OTHER REQUIRED PERMITS, AND IF REQUESTED, MUST BE MADE AVAILABLE FOR INSPECTION BY GOVERNMENT REPRESENTATIVE.

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ADMINISTRATOR  
BUREAU OF ENVIRONMENTAL & COASTAL QUALITY