Three (3) copies of the drawings must accompany this permit application.	
When applicable, the following supplement is also required	Permit Number
and shall become a part of this permit: Railroad Supplement	CONTROL SECTION
ENTERED IN COMPUTER FILE	
INITIAL AND DATE	
DEPARTMENT OF TRANSPO PROJEC (Required by S	FLOUISIANA RTATION AND DEVELOPMENT T PERMIT tate Law) Rev 5/13 The site where and when work is performed.
Whereas Edward L. Renton Jr.	.,
(Print or type r	name of applicant)
hereinafter termed applicant, requests a permit for the use and occupancy o	f the right-of-way of State Highway NoBeltway Drive
in St. Charles Parish, located	as follows:
from: East Side of Belt Way Drive Servitude	Lat: 29.58'19.35 Long: 90.18'33.35
to: West Side of Belt Way Drive Servidue	Lat: <u>29.58'19.52</u> Long: <u>90.18'54.08</u> (in Decimal Degrees, e.g. Lat:-30.459, Long: -91.178)
for the installation, operation and maintenance of the following described paths installation of a 60 Foot X30" Culvert across the Beltway	
	iving a copy of the permit, the general conditions and standards, and s to comply with all provisions contained therein and all applicable ta sary):
RECOMMENDED FOR APPROVAL (Check box if review required)	Permit must be signed by the owner or lessee of the property. Contractor may NOT acquire permit
	(Agency Representative Signature) (Date) Edward L. Renton Jr.
☑ District Area Engineer / Date	
	(Name of Person Signing Permit) (Printed or Typed) Owner (Title)
☐ District Water Resources Engineer / Date	(Name of Person Signing Permit) (Printed or Typed) Owner (Title) 608 Little Farms Avenue (Street or P.O. Box) River Ridge LA 70123 (City or Town) (State) (Zip Code)
District Administrator (or Designee) / Date Print Name_	(Name of Person Signing Permit) (Printed or Typed) Owner (Title) 608 Little Farms Avenue (Street or P.O. Box) River Ridge LA 70123 (City or Town) (State) (Zip Code) 504-874-3625 (Telephone Number) edrenton@aol.com
District Administrator (or Designee) / Date	(Name of Person Signing Permit) (Printed or Typed) Owner (Title) 608 Little Farms Avenue (Street or P.O. Box) River Ridge LA 70123 (City or Town) (State) (Zip Code) 504-874-3625 (Telephone Number)

Issue Date: ___

(Date)

Installation to be completed by: ___

HEADQUARTERS (original)

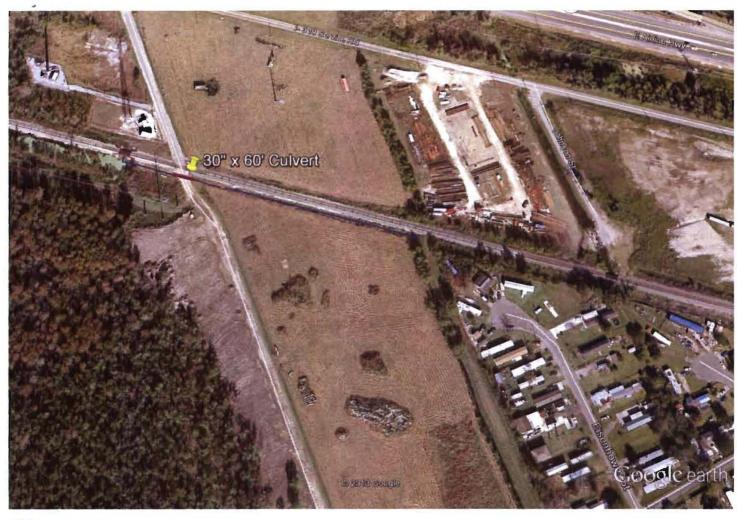
Print Name _____

pc: DISTRICT

Headquarters Right-of-Way Permit Engineer / Date or District Administrator (or Designee) / Date

pe: PERMITTEE

Page 1 of 3



Google earth

