

WATER

United States Virgin Islands MINOR United States Virgin Islands Department of Planning and Natural Resources

Development Permit Application

| 1.00 | NAME AND ADDRESS OF APPLICANT |
|----------------------|--|
| 2.00 2.01 2.02 | LOCATION OF PROJECT □Location and Agency Review Map □A copy of the Vicinity Map |
| 3.00 | ABSTRACT |
| 4.00 | STATEMENT OF OBJECTIVES SOUG HT BY THE PROPOSED PROJECT |
| 5.00 | DESCRIPTION OF PROJECT |
| 5.01 | SUMMARY OF PROPOSED ACTIVITY (To be provided on drawings) |
| | a. □Discuss purpose of project b. □Discuss the presence and location of any critical area(s) and possible trouble spots c. □Discuss proposed method of construction d. □Discuss provisions to limit site disturbance e. □Discuss sedimentation control methods to be implemented f. □Show schedule for construction activities & implementation of sediment control measures. g. □Discuss the maintenance of sediment and siltation control measures |
| 6.00 | OTHER REQUIRED SUBMITTALS |
| | a. □Application Letter (Form L&WD-1) b. □Joint Application, U.S. Army Corps of Engineers/Virgin Islands Department of Planning and Natural Resources c. □Proof of Legal Interest (Form L&WD-5) d. □Income tax clearance letter (Form L&WD-6) e. □Corporate and Association Application Form – If a corporation is the applicant, developer or owner of the project (Form L&WD-7) f. □Certificate of Corporate Good Standing or Equivalent (For corporate applicants, associations, developers or owners) g. □Copy of Deed/Lease/Purchase Agreement/Easement Rights. h. □Application Fees i. □List all property owners within a 150' radius of the property boundaries. Include current mailing addresses as exist at the tax assessor's office. j. □Qualifications & background of designers, engineers & other professionals involved with the project. k. □A cost estimate (materials and labor) must be submitted. l. □Revenue projection – provide the total gross revenue that can be generated from the proposed project m. □Environmental Assessment Report for Minor Projects in Coastal Waters. |

DEPARTMENT OF PLANNING AND NATURAL RESOURCES DIVISION COASTAL ZONE MANAGEMENT

ENVIRONMENTAL ASSESSMENT REPORT FOR MINOR PROJECTS IN COASTAL WATERS

Instructions for Completing this Report: Applicant must complete this form. Use back of page and/or attach additional sheets if more spaces are needed to complete any response - be sure to give the appropriate question number. If all information is not accurate and complete, the application will be rejected until such deficiencies are corrected.

| Section I. Applicant |
|---|
| 1. Name, mailing address, email address and telephone number of Applicant. |
| |
| |
| 2. Name, address, email address and telephone number of owner of upland property and developer (if different from Applicant). |
| |
| |
| Section II. Project Objectives and Description |
| In this section give a brief description of the proposed development, including all structures esubmerged lands, coastal waters or shorelines. The relationship of the development to applicabilities below should be explained fully. Attach additional sheets if necessary. |
| 3. Briefly describe what the project is intended to achieve (e.g. private pier for sailboats, etc.) |
| |
| |

| 4. | Will the development extend into or adjoin any beach or shoreline area? Explain. |
|----|--|
| 5. | Will the development maintain, enhance, or conflict with public access to the shoreline and along the coast? Explain. |
| | |
| 6. | Describe the construction methods to be used. |
| 7. | Describe procedures to be used in controlling environmental impacts. |
| | |
| 8 | Describe reasonable alternatives to the project, or to its location, which could feasibly attain the basic objectives, and why they were rejected in favor of the ultimate choice. |
| | |

Section III. Description of the Existing Environment Without the Project

(Information supplied must be current: if obtained from other studies, give name, year and authorship of publication.)

| 9. | Give a qualitative description of the bottom sediments in the immediate vicinity of the project. State color, odor, and use the following terms to describe grain size: boulders, cobblestones, gravel, coarse sand, muddy sand, mud, beachrock coral rock. | | |
|----|---|-------------------------------------|--|
| | | | |
| | | | |
| 10 | . Check the boxes which best describe the types of co the immediate project area, and within 1/4 mile (1,3 | | |
| | ☐ corals, including soft corals | ☐ salt ponds | |
| | ☐ seagrass or algal beds | ☐ rocky shore | |
| | ☐ hard, rocky bottom | ☐ sand beach | |
| | ☐ sand bottom | ☐ cobble beach | |
| | ☐ muddy bottom | ☐ developed or urbanized waterfront | |
| | ☐ mangroves | ☐ other (describe) | |
| | | | |

Section IV. <u>Environmental Effects</u>

| 11. List any anticipated adverse <u>environmental effects</u> resulting from implementation of this proje and any measures that will be taken to minimize these. | | |
|--|----------------------------------|------------------------|
| | | |
| | | |
| | | |
| Section V. <u>Preparation o</u> | of EAR and Person(s) Consulted | <u>I</u> |
| 12. Person(s), firm or agency | preparing the EAR, by contract o | r other authorization: |
| Name (Print) | (Signature) | Date |
| Address | | Zip |
| Email Address | | Telephone Number |
| 13. Person(s) or agencies cons | sulted: | |
| | | |
| | | |

FORM L&WD-1* JOINT PERMIT APPLICATION LETTER

COMMISSIONER
DEPARTMENT OF PLANNING AND NATURAL RESOURCES
8100 LINDBERG BAY, STE #61
CYRIL E. KING AIRPORT TERMINAL, SECOND FLOOR
ST. THOMAS, US VIRGIN ISLANDS 00802

| Dear Commissioner: | | | | | |
|------------------------|---|--------------------------------------|--|--|--|
| _ | The undersigned wishes to make application to the Virgin Islands Government and the Secretary of the Army for a permit to: | | | | |
| | | | | | |
| | | | | | |
| Islands Code, and I he | approval of this application is required pure ereby certify that the proposed activity condithat the development will be conducted ement Program. | mplies with the enforceable policies | | | |
| It is further requeste | cation is the Department of the Army per d that this letter and application be for egulatory Section, for consideration. | | | | |
| Signature of Applica | nt | | | | |
| (Sign) | (Print) | Date | | | |
| Official Title, | if a Corporation | | | | |

^{*}Not required if the application is for the continued use and occupancy of an existing structure, and no development activities will be taking place.

FORM L&WD-2 PERMIT APPLICATION

| Date Received: | |
|--|---|
| Date Declared Complete: | Permit Application No.: |
| - | ☐ Earth Change ☐ Coastal Zone Permit |
| 1. Name, mailing address, email interest in the property, to whi | address and telephone number of Applicant (person/entity with legal ch permit will be issued) |
| | |
| | |
| 2. Name, mailing address, email any) | address and telephone number of Owner of property and Agent (if |
| Owner(s) of Property | <u>Agent</u> |
| | |
| | |
| | |
| 3. Location of activity. Plot No.: | PIN No.: |
| Estate: | Island: |
| 4a. Zoning District: | |
| 4b. State type of Land Uses as spe hotel, single-family dwelling. | ecified in the VI Zoning Law, which are applied for (e.g., restaurant, , etc.) |
| 5. Name, mailing address, email | and telephone number of project designer. |
| | |
| | |
| 6. Summary of proposed activity additional sheets if necessary) | . Include all incidental improvements such as utilities, roads, etc. (Use |
| | |
| | |

FORM L&WD-2/PERMIT APPLICATION CONT'D

| 7. | Date activity is proposed to start | ; be completed | | | |
|-----------------|--|--|---|--|---|
| 8. | Classification of minor or major permit. C | Check one: | | | |
| | ☐ Minor Permit Application | | | | |
| | ☐ Major Permit Application | | | | |
| Sta | te below which criterion applies in making | above check. | | | |
| | | | | | |
| 9. | Application is hereby made for a permit to any additional information/data that may show that the proposed project will comply or other environmental protection standard I also agree to provide entry to the project s Resources, or other environmental protect this application. To the best of my know complete, and accurate. I further certify the Signature of Applicant or Agent (if not own) | be necessary to provide re- y with the applicable territors, both during construction diete for inspectors from the lation agencies, for the purp- wledge and belief, the in at I possess the authority to | easonable a orial air and and after Departmen ose of mak formation | assurance I water q the project t of Plan- ting insp provided | e or evidence to uality standards, ect is completed. ning and Natural ection regarding I herein is true, |
| | | | <u> </u> | | |
| | Sign | Print | | | Date |
| | Signature of Owner(s) of the property (Red | quired) | | | |
| | Sign | Print | _ | | Date |
| | Sign | Print | | | Date |
| _ | _ | ARTMENT USE ONLY | | | |
| Date Inspected: | | ☐ Appli☐ Appli | | pproved isapproved | |
| Ins | pector's Remarks: | | — · · · · · · · | | |
| | | | | | |
| | | | | | |
| | Inspector | | | | Date |
| (| Commissioner, Planning & Natural Resource | es | | | Date |

FORM L&WD-5 PROOF OF LEGAL INTEREST

| AFFIDAVIT | | | | |
|---|--------------------------------|--|------------------------|-----------------|
| I,Applicant(s)* | (or John Doe of Entity Applica | nt) | being duly sworn depos | e and say that: |
| 1. (I/We or Entity/Ap | oplicant) | _am/are/is the (ch | eck one below) | |
| ☐ Record title owner (f | ee simple) | □ Lessee | ☐ Other (specify) | |
| Of the real property describe | ed as Parcel No(s) | | | _ |
| Estate | Quarter | | Island | |
| *Property tax clearance le 2. I have the irrevocable appin the property to underta (s) attached hereto: Signature | provals, permission, o | or power of attorn d in the permit ap | | |
| Print | | Print | | |
| The foregoing instrument w | vas acknowledged bet | | day of | |
| 20 by | ame or Name/Title of Entity) | | at | county |
| of | | | | |
| Notary Public | | My Commission | n expires | |

GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES -0-

VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE

(DPNR FORM L&WD-6) APPLICATION FOR TAX FILING AND PAYMENT STATUS REPORT**

Date: _____

| The applicant identified below hereby requests a letter certifying his or her tax filing and payment status for the purpose of receiving a Coastal Zone Management Permit from the Virgin Islands Department of Planning and Natural Resources pursuant to Act 5270, amending Sections 910 (a)(2) and 911 (d)(2) of the Coastal Zone Management Act (Title 12, Chapter 21, Virgin Islands Code). The applicant authorizes the Bureau of Internal Revenue to disclose any taxpayer information necessary to process this application to the Virgin Islands Department of Planning and Natural Resources, who may make such further disclosures as are necessary to carry out the requirements of the Coastal Zone Management Act, as amended. | | | | |
|--|---|--|--|--|
| Name: | | | | |
| Business Name: | | | | |
| EIN/TIN: | | | | |
| SSN: | | | | |
| Please Indicate: □*Corporation □*Partnership | Type of Business: Please check forms that you use: | | | |
| ☐ Individual ☐ Other | □1120, □1065, □1040, □941VI, □722VI, □720B, □720VI, □other (list) | | | |
| Date Business Started: | | | | |
| Person Representing Applicant: | Position: | | | |
| Signature: | | | | |
| Mailing Address: | | | | |
| Date: | Telephone Number: | | | |

* Partnership and/or Corporations must list partners/ corporate officers, social security numbers and addresses on a separate sheet and attach it to this application.

Reply to: 6115 Estate Smith Bay, suite 225, St. Thomas VI 00802 – 340-715-1040(phone), 340-774-2672(fax)

or 4008 Estate Diamond, St. Croix VI 00820 – 340-773-1040(phone), 340-773-1006(fax)

THIS FORM IS TO BE SUBMITTED TO VIBIR UPON COMPLETION

PUBLIC NOTICE (SUPPLEMENT TO FORM L&WD-6)

Pursuant to Act 5270, as approved by the Governor of the Virgin Islands on July 30, 1987, amending Section 910 (a) (2) and 911 (d) (2) of the Coastal Zone Management Act (Title 12, VI Code, Chapter 21), all applicants for Coastal Zone Management permits are required to present "certification from Bureau of Internal Revenue and Department of Finance" indicating "that the applicant has filed and paid all taxes, penalties and interest, and from the Office of the Lieutenant Governor that the applicants has filled its required annual report or has satisfactorily made agreement to pay the taxes or fill the required reports "12 VIC 910 (a) (2) (C), and " (2) A coastal zone permit that includes an occupancy or development lease shall only be granted for a particular parcel of filled land for a lease period of not more than 20 years; provided that nothing in this subsection shall prohibit a lessee or permittee from executing a new lease at the end of the 20 year period. Any lease executed at the end of the lease period shall meet the requirements of this Chapter and shall be approved by the Governor and ratified by the Legislature, or in the event the Legislature is not in session, by the Committee on Planning and Environmental Protection.

For applicants not required by law to submit an annual report or to satisfactorily make an agreement to pay taxes or file the required reports, a letter from the Bureau of Internal Revenue, and/or the Department of Finance, and/or the Lieutenant Governor's office so indicating will be required to continue further processing of the application.

Accordingly, all Coastal Zone Management permit applications (both minor and major), which are not accompanied by the certificates, as required by Act 5270, or written notification from said agencies indicating waiver or exemption of these requirements will not be accepted by the permitting office. It is the responsibility of each applicant to demonstrate compliance with the provisions of this Act.

FORM L&WD-7 CORPORATION/ASSOCIATION APPLICATION

(To be used when a corporation or association is making a Permit Application in Tier l)

| (Corporation or Association Na | ame) | | |
|--|------------------------|--|-----------------------|
| | , | | |
| | | | |
| By: | | | |
| (Signature) President or Vice-President o | or equivalent | Title/Position | (Print) |
| Print | | | |
| WITNESS: | | | |
| | | ATTEST: | |
| | | ATTEST: Secretary (or equivalent) | Signature |
| | | | |
| | | Secretary (or equivalent) | Print |
| | | | Seal |
| On thisday of | , 20 be | fore me the undersigned officer, personall | y appeared |
| | who acknowledges hi | mself to be the | |
| of | ; that he execu | uted the foregoing instrument in the capac | ity above and has the |
| authority to execute this application o | on behalf of the compa | ny. | |
| IN WITNESS WHEREOF, I h | ave hereunto set my h | and and official seal the day and year abo | ove written. |
| | | | |
| | | | |

Include Supporting Documents:

- 1. Compliance with Act No. 5270 by providing:
 - (a) Tax clearance letter from the Bureau of Internal Revenue
 - (b) Property tax clearance letter from the Lieutenant Governor's Office.
 - (c) Corporations and Associations: Certificate of Good Standing or equivalent, organizational documents & Amendments (Articles, Bylaws, Operating Agreement, Declarations)
 - (d) Corporate Resolution (or equivalent) authorizing action on behalf of the company.

FEE SCHEDULE

(TIER 1 ONLY)

As provided in Title 1 2, Chapter 21, Section 910(e)(4) VIC and set forth in Tit le 12 V.I. Ru les and Regulations Subsection 910, effective September 18, 1992, a non-refundable administrative processing fee will be required to be filed with the applications for all Coastal Zone Permits in accordance with the following fee schedule:

(A) Minor Coastal Zone Permit Application

| (i) | For estimated construction cost of \$10,000 or less\$50.00 |
|-------------|--|
| (i i) | For estimated construction cost greater than \$10,000 but less than \$25,000 |
| (iii) | For estimated construction cost of \$25,000 or greater \$200.00 |
| (B) Major C | oastal Zone Permit Application |
| (i) | For estimated construction cost of \$250,000 or less\$500.00 |
| (ii) | For estimated construction cost of \$250,000 but less than \$500,000 |
| (iii) | For estimated construction cost of \$500,000 or greater \$1,000.00 |

Whenever the Commissioner finds that the processing of a Major Coastal Zone Permit Application requires significant administrative expenditures in excess of those typically required, additional reasonable fees may be assessed to cover, for instance, the hiring of consultants when specialized expertise is needed that is not available in the Department.

U.S. ARMY CORPS OF ENGINEERS APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT

33 CFR 325. The proponent agency is CECW-CO-R.

Form Approved -OMB No. 0710-0003 Expires: 30-SEPTEMBER-2015

Public reporting for this collection of information is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters, Executive Services and Communications Directorate, Information Management Division and to the Office of Management and Budget, Paperwork Reduction Project (0710-0003). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN your form to either of those addresses. Completed applications must be submitted to the District Engineer having jurisdiction over the location of the proposed activity.

PRIVACY ACT STATEMENT

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned.

| (ITEMS 1 THRU 4 TO BE FILLED BY THE CORPS) | | | | | | | | | |
|---|------------------------|----------------------|--|------------------|--------|------------------------------|--|--|--|
| 1. APPLICATION NO. | 2. FIELD OFFICE (| 2. FIELD OFFICE CODE | | 3. DATE RECEIVED | | 4. DATE APPLICATION COMPLETE | | | |
| | | | | | | | | | |
| (ITEMS BELOW TO BE FILLED BY APPLICANT) | | | | | | | | | |
| 5. APPLICANT'S NAME | | | 8. AUTHORIZED AGENT'S NAME AND TITLE (agent is not required) | | | | | | |
| First - Middle - | Last - | | First - | Middle - | Las | t- | | | |
| Company - | | | Company - | | | | | | |
| E-mail Address - | | | E-mail Address - | | | | | | |
| 6. APPLICANT'S ADDRESS: | | | 9. AGENT'S ADDRESS: | | | | | | |
| Address- | | | Address- | | | | | | |
| City - State - | Zip - | Country - | City - | State - | Zip - | Country - | | | |
| 7. APPLICANT'S PHONE NOs. WAREA CODE | | | 10. AGENTS PHONE NOs. w/AREA CODE | | | | | | |
| a. Residence b. Busin | ess c. Fax | | a. Residence | b. Busine | ss c. | Fax | | | |
| STATEMENT OF AUTHORIZATION | | | | | | | | | |
| 11. I hereby authorize, to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application. | | | | | | | | | |
| SIGNATURE OF APPLICANT DATE | | | | | | | | | |
| NAME, LOCATION, AND DESCRIPTION OF PROJECT OR ACTIVITY | | | | | | | | | |
| 12. PROJECT NAME OR TITLE (s | ee instructions) | | | | | | | | |
| 13. NAME OF WATERBODY, IF KNOWN (if applicable) | | | 14. PROJECT STREET ADDRESS (if applicable) | | | | | | |
| | | | Address | | | | | | |
| 15. LOCATION OF PROJECT | | | City - | 5 | State- | Zip- | | | |
| Latitude: •N | Longitude: •W | instructions) | <u> </u> | | | ,r | | | |
| 16. OTHER LOCATION DESCRIP State Tax Parcel ID | TIONS, IF KNOVVIV (See | Municipality | | | | | | | |
| Section - | Township - | • • | Range - | | | | | | |
| | | | | | | | | | |

| 18. Nature of Activity (Description of project, | include all features) | · · · · · · · · · · · · · · · · · · · | |
|--|---|---------------------------------------|------|
| To. Materie of Adilvity (Description of project, | morade an reactivesy | | |
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| 19. Project Purpose (Describe the reason or | purpose of the project, see instructions) | | |
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| LISE BLO | CKS 20-23 IF DREDGED AND/OR FILL MATERIA | AL IS TO BE DISCHARGED | ···· |
| 032 820 | ORS 20-23 IF DREDGED AND/OR FILE MATERIA | TE 13 TO BE DISCHARGED | |
| 20. Reason(s) for Discharge | | | |
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| 21. Type(s) of Material Being Discharged an | | | |
| Type | Туре | Type | |
| | | Type Amount in Cubic Yards | |
| Type | Туре | | |
| Type | Type Amount in Cubic Yards | | |
| Type Amount in Cubic Yards | Type Amount in Cubic Yards | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot | Type Amount in Cubic Yards | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres | Type Amount in Cubic Yards | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres or Linear Feet | Type Amount in Cubic Yards her Waters Filled (see instructions) | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres or | Type Amount in Cubic Yards her Waters Filled (see instructions) | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres or Linear Feet | Type Amount in Cubic Yards her Waters Filled (see instructions) | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres or Linear Feet | Type Amount in Cubic Yards her Waters Filled (see instructions) | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres or Linear Feet | Type Amount in Cubic Yards her Waters Filled (see instructions) | | |
| Type Amount in Cubic Yards 22. Surface Area in Acres of Wetlands or Ot Acres or Linear Feet | Type Amount in Cubic Yards her Waters Filled (see instructions) | | |

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| 24. Is Any Portion of the Work Already Complete? Yes No IF YES, DESCRIBE THE COMPLETED WORK | | | | | | | |
|---|--|--|--|-----------------------------|--|--|--|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 25. Addresses of Adjoining Property Owners, Lessees | , Etc., Whose Property Ad | joins the Waterbody (if more | e than can be entered here, please a | ttach a supplemental list). | | | |
| a. Address- | | | | | | | |
| City - | State - | Zip - | | | | | |
| b. Address- | | | | | | | |
| City - | State - | Zip - | | | | | |
| c. Address- | | | | | | | |
| City - | State - | Zip - | | | | | |
| d. Address- | | | | | | | |
| City - | State - | Zip - | | | | | |
| e. Address- | | | | | | | |
| City - | State - | Zip - | | | | | |
| 26. List of Other Certificates or Approvals/Denials rece | | State, or Local Agencies fo | r Work Described in This A | oplication. | | | |
| AGENCY TYPE APPROVAL* | IDENTIFICATION NUMBER | DATE APPLIED | DATE APPROVED | DATE DENIED | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| * Would include but is not restricted to zoning, building. | and flood plain permits | | | | | | |
| 27. Application is hereby made for permit or permits to complete and accurate. I further certify that I possess applicant. | | | | | | | |
| SIGNATURE OF APPLICANT | DATE | SIGNATI | JRE OF AGENT | DATE | | | |
| The Application must be signed by the person what authorized agent if the statement in block 11 has | | | applicant) or it may be si | gned by a duly | | | |
| 18 U.S.C. Section 1001 provides that: Whoever, knowingly and willfully falsifies, conceals, or cove fraudulent statements or representations or make fraudulent statements or entry, shall be fined not | ers up any trick, scheme es or uses any false wri | e, or disguises a materi iting or document know | al fact or makes any fals ing same to contain any | e, fictitious or | | | |

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