

**Permit Application for Aquatic Vegetation Treatment  
Appalachian Power Company  
Smith Mountain Lake and Leesville Lake**

**APPLICANT INFORMATION:**

Landowner / Organization Name: _____	Applicator / Company: _____
Lake Address: _____ <i>(no P.O. Box)</i>	Address: _____
Phone: (    ) _____	Phone: (    ) _____
Tax Map and Parcel #: _____	License No. _____

**PERMIT INFORMATION:**

New Permit Application [  ]                      Extend Existing Permit [  ]  
*existing permit # \_\_\_\_\_*

**LOCATION:**

Permit for Smith Mountain Lake [  ]                      Permit for Leesville Lake [  ]

**TREATMENT METHOD:**

[  ] Herbicide \_\_\_\_\_  
*(list type of herbicide to be used)*

If herbicide is being used, provide the number of anticipated applications during 3 month permit period. \_\_\_\_\_

**BED DESCRIPTION:**

Bed Size (square feet) \_\_\_\_\_  
Distance from Landowner's shoreline (in feet) \_\_\_\_\_  
Dominant Species \_\_\_\_\_ Subdominant species \_\_\_\_\_  
Other species in or around the bed \_\_\_\_\_  
Are there any native species within 100 ft of the bed to be removed? \_\_\_\_\_ If so, what species? \_\_\_\_\_

I certify that all information provided in this application is true and correct and a copy has been provided to the licensed applicator prior to treatment.

Signature: \_\_\_\_\_

- All application of herbicides must be performed by a licensed applicator.
- Permits are issued for a three month period.
- No vegetation treatment shall occur during fish spawning season (March 15-June 15).
- All vegetation treatment sites are subject to review by Appalachian prior to permit issuance.
- **The Licensed Applicator is required to submit the Report Following Treatment to Appalachian within 30 days of treatment.**

Return application to:  
Appalachian Power Company's Shoreline Management Office,  
996 Old Franklin Turnpike, Rocky Mount, VA 24151  
Telephone: (540) 489-2556 Fax: 540-489-2567

--FOR OFFICE USE ONLY--

Received Date: _____	Site Survey Date: _____
Received By: _____	Site Surveyed By: _____
Reviewed By: _____	Permit Issue Date: _____
Permit # _____	Shoreline Classification: _____