



CAMA DREDGE & FILL GENERAL PERMIT

No 98709

A B

Previous permit _____

Date previous permit issued _____

New Modification Complete Reissue Partial Reissue

As authorized by the State of North Carolina, Department of Environmental Quality and the Coastal Resources Commission in an area of environmental concern pursuant to:

ISA NCAC 7H.1200 Rules attached.

General Permit Rules available at the following link: www.deq.nc.gov/CAMARules

Applicant Name Robert Harris
Address 13 North Point Drive
City Colts Neck State NS ZIP 07722
Phone # (732) 287-0576
Email _____

Authorized Agent CPS, LLC (Jason Dail)
Project Location (County): Onslow
Street Address/State Road/Lot # (s) 411 New River Inlet Rd.
Subdivision _____
City North Topsail Beach ZIP _____

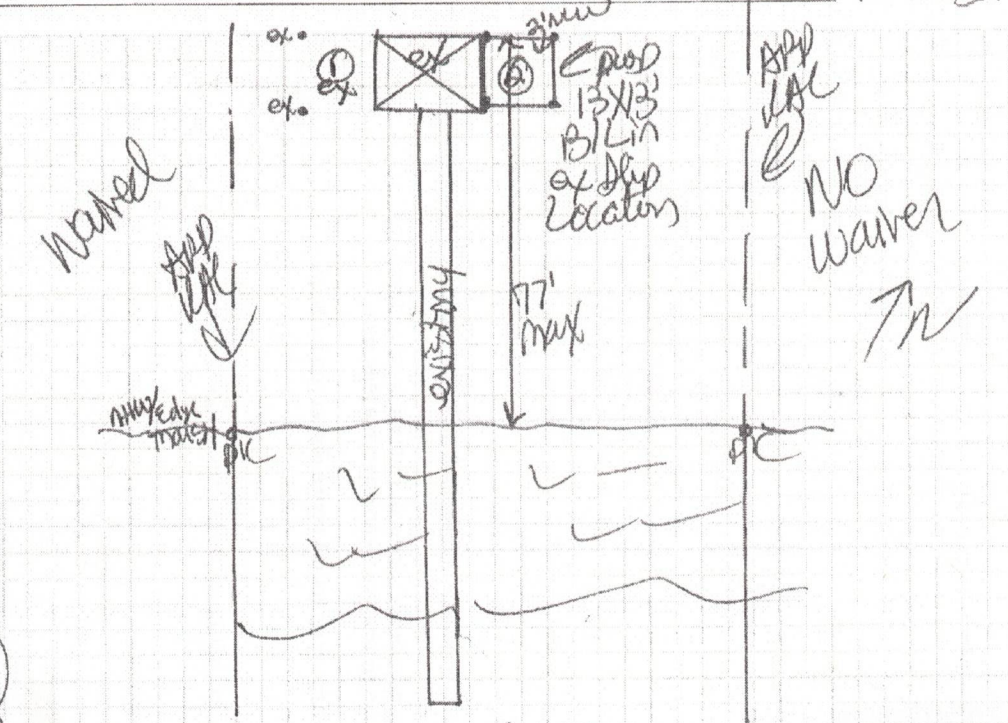
Affected CW EW PTA ES PTS
AEC(s): OEA IHA UW SPIMA PWS
ORW: yes no PNA: yes no

Adj. Wtr. Body Stump Sound (nat/man/unl)
Closest Maj. Wtr. Body Stump Sound

Type of Project/ Activity Install Boatlift w/ ex. Slip

(Scale: 1" = 30')

Shoreline Length 92.15'
Access Length _____
Pier (dock) length _____
Fixed Platform(s) _____
Floating Platform(s) _____
Finger pier(s) _____
Total Platform area _____
Groin length/# _____
Bulkhead/ Riprap length _____
Avg distance offshore _____
Breakwater/Sill _____
Max distance/ length _____
Basin, channel _____
Cubic yards _____
Boat ramp _____
Boathouse/Boatlift 13'x13'
Beach Bulldozing _____
Other 2 ex. Slips



SAV observed: yes no
Moratorium: n/a yes no
Site Photos: yes no
Riparian Waiver Attached: yes no

A building permit/zoning permit may be required by: Lower Peninsula Town of North Topsail Beach

Permit Conditions 1) All work shall remain with the ex. Docking facility & slip footprint.
2) All pertinent 7H.1200 conditions apply.

- TAR/PAM/NEUSE/BUFFER (circle one)
- See note on back regarding River Basin rules
- See additional notes/conditions on back

I AM AWARE OF STATUTES, CRC RULES AND CONDITIONS THAT APPLY TO THIS PROJECT AND REVIEWED COMPLIANCE STATEMENT. (Please Initial) JD

Agent or Applicant PRINTED Name CPS, LLC (Jason Dail)

Signature [Signature]

Application Fee(s) 40000 Check #/Money Order #1090

Permit Officer's PRINTED Name Heather Stynor

Signature [Signature]

Issuing Date 4-3-25 Expiration Date 8-3-25