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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Environmental Review** |  |  |  |  |  |  |  |  | P.1 of 2 |
|  |  |  |  |  |  |  |  |  |  |
|  |  | **Statutory Cross-Cutters Checklist** |
|  |  |  Federal Laws and Authorities listed at 40 CFR 6.3 |
|  |  |  |  |  |  |  |  |  |  |
| **Project Name and DWSRF No.** |  |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
| **Area of Statutory or Regulatory Compliance** |  Not Applicable to This Project  |  Consultation Required\* |  Review Required\* |  Permits Required\* |  Determination of consistency |  Approvals, Permits Obtained\* |  Conditions and/or Mitigation |  Actions Required |  Provide compliance documentation. Additional material may be attached. |
| Historic Properties |   |   |   |   |   |   |   |   |   |
| Floodplain Management |   |   |   |   |   |   |   |   |   |
| Wetlands Protection |   |   |   |   |   |   |   |   |   |
| Interbasin Water Transfer |   |   |   |   |   |   |   |   |   |
| Water Quality - Aquifers |   |   |   |   |   |   |   |   |   |
| Endangered Species |   |   |   |   |   |   |   |   |   |
| Wild and Scenic Rivers |   |   |   |   |   |   |   |   |   |
| Air Quality |   |   |   |   |   |   |   |   |   |
| Farmlands Protection |   |   |   |   |   |   |   |   |   |
| Environmental Justice |   |   |   |   |   |   |   |   |   |
| **State or Local Statutes** | (to be added by Responsible Entity) |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
| \* Attach evidence that required actions have been taken. |   |   |   |   |
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|  |  |  |  |  |  |  |  |  | P.2 of 2 |
| **Statutory Cross-Cutters Checklist (continued)**  |  |  |  |
| Project Name and Identification No. |  |   |
|  |  |  |  |  |  |  |  |  |  |
|   |   |   |   |   |   |   |   |  |  |
| **Summary of Findings and Conclusions:** |  |  |  |  |  |
|  |
| **Summary of Environmental Conditions:** |  |  |  |  |  |
|  |
| **Project Modifications and Alternatives Considered:** |  |  |  |
|  |
| **Additional Studies Performed:**  | (Attach study or summary) |  |  |  |
|  |
| **Mitigation Measures Needed:** |  |  |  |  |  |  |  |
|  |
|  |  |  |  |  |  |  |  |  |  |
| **Prepared By:**  |  |
|  |

**Date:**