

Appendix B:

Environmental Information Document Tables

Disclaimer: Content may not be removed from these forms.
Updated 6/2025

Table 1.1. Federal Flood Risk Management Standards (FFRMS) Floodplain Management [24 CFR 58.5(b)(1)] Project Name: Owner Name:					
Floodplain Figure Reference Number (if applicable):					
Floodplain Information Appendix Reference (if applicable):					
<i>Floodplain Management - Existing Conditions</i>					
<i>Complete the table per Section 4.2 of the guidance for projects categorized as: CEST and FONSI.</i>					
Is the project in the FFRMS floodplain? (If so, show in Environmental Features Figure and complete Table 2.2.)				☐ Yes ☐ No	
Is the project a non-critical action or a critical action? (§55.16)				☐ Non-critical ☐ Critical	
Which method was used to determine if project is in FFRMS floodplain?				☐ CISA map ☐ 0.2 annual chance of flood risk ☐ Freeboard Value Approach	
Is the project in the floodway or coastal high-hazard area? (Show any floodway or coastal high-hazard area in Environmental Features Figure.) If the project is not functionally dependent, de minimis construction, or removal of structures, it must be rejected.				☐ Yes ☐ No	
Was the 8-Step Process Completed? (if "Yes", complete Table 2.2)				☐ Yes ☐ No	
<i>Impacts & Mitigation (Choose single most appropriate box for each category.)</i>					
<i>Construction Impacts</i>		<i>Operational Impacts</i>		<i>SCI</i>	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Describe benefits and impacts to floodplains associated with the project.					
*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures					
<i>Sources Consulted (add more rows if needed)</i>				<i>Date</i>	<i>Reference(s)</i>

Table 1.2. Floodplains – 8 Step Process (24 CFR Part 55, Subpart C) Project Name: Owner Name:	
<i>Complete this table in accordance with Section 4.2 for projects in the floodplain.</i>	
Floodplain Figure Reference Number (if applicable):	
Floodplain Information Appendix Reference (if applicable):	
<i>Complete the 8-step Process for all projects located in the Floodplain (§50.20)</i>	
<i>Step 1: Is the project in the FFRMS floodplain?</i>	☐ Yes ☐ No
<i>Step 2: Involve the public in decision-making process (early public notice).</i> <i>Provide date of notice for early public notice:</i>	
<i>Provide name of publication or government website, where notice of early review was published:</i>	
<i>Step 3: Determine if there is a practicable alternative. Identify and evaluate practicable alternatives to locating in the FFRMS floodplain, including alternative sites outside of the floodplain.</i>	
<i>Have costs of flood insurance and potential property losses from flooding been added as a consideration for alternatives?</i> ☐ Yes ☐ No ☐ N/A	
<i>Step 4: Identify adverse and beneficial impacts of the proposed action.</i>	
<i>Step 5: Develop measures to mitigate adverse impacts.</i>	
<i>Was the FFRMS floodplain elevation used for any needed Elevation or Floodproofing Certificates?</i> ☐ Yes ☐ No ☐ N/A	
<i>For critical actions, is an early warning system in place?</i> ☐ Yes ☐ No ☐ N/A	
<i>Step 6: Re-evaluate Alternatives.</i>	
<i>Is the project located in an area that impacts and Environmental Justice Community?</i> ☐ Yes ☐ No ☐ N/A	

<i>If yes, does the reevaluation of the alternatives address public input provided during public outreach process, reducing environmental disparities related to flood risk on the Community?</i> ☐ Yes ☐ No ☐ N/A		
<i>Step 7: Announce and explain decision to the public final public notice).</i> <i>Provide date of notice of finding and a public explanation:</i>		
<i>Provide name of publication or government website, where for notice of finding was published:</i>		
<i>Step 8: Implement proposal with appropriate mitigation.</i>		
<i>Sources Consulted (add more rows if needed)</i>	<i>Date</i>	<i>Reference(s)</i>

Table 2.1. Prime and Unique Farmland [24 CFR 58.5(h)] Project Name: Owner Name:					
<i>Complete this table per Section 4.4 of the guidance for projects categorized as: CEST, FONSI.</i>					
Prime and Unique Farmland Information Appendix Reference (if applicable):					
Existing Conditions & Impacts					
1) <i>Is the proposed project located on or adjacent to land categorized as prime or unique farmlands or farmland of statewide or local importance?</i>		☐ Yes ☐ No		If Yes, is the land committed to urban development (as defined in 7 CFR 658.2) or water storage? <i>Provide source.</i>	☐ Yes ☐ No
2) <i>Will drainage from the project adversely affect farmland?</i>		☐ Yes ☐ No			
3) <i>Will the project convert prime or unique farmland or farmland of statewide or local importance directly or indirectly?</i>		☐ Yes ☐ No		If Yes, Acres Impacted:	
a) <i>If Yes, Must attach Form 1006 [7 CFR 658]. Date Form 1006 Submitted to NRCS: Date of Response from NRCS:</i>					
4) <i>Will the project introduce nuisance species which may spread to adjacent farmland?</i>		☐ Yes ☐ No			
Impacts & Mitigation (Choose single most appropriate box.)					
Construction Impacts		Operational Impacts		SCI	
<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐
<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐
<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐
<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐
<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐
<i>Describe benefits and impacts to prime and unique farmlands associated with the project.</i>					

Table 2.1. Prime and Unique Farmland [24 CFR 58.5(h)] Project Name Owner Name		
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>		
<i>Sources Consulted (add more rows if needed)</i>	<i>Date</i>	<i>Reference(s)</i>

Table 3.1. Wild & Scenic Rivers [24 CFR 58.5(f)]					
Project Name					
Owner Name					
Complete this table per Section 4.6 of the guidance for projects categorized as: CEST, FONSI.					
Wild & Scenic Rivers Information Appendix Reference (if applicable):					
Is the project located within the same county as the designated Wild & Scenic Rivers or a river in the Nationwide Rivers inventory, or its tributaries? If Yes, provide map.					
Chattooga River	☐ Yes	☐ No	New River	☐ Yes	☐ No
Horsepasture River	☐ Yes	☐ No	Wilson Creek	☐ Yes	☐ No
Lumber River	☐ Yes	☐ No			
Is the project site within 1/4 mile of a federally protected portion of the River? ☐ Yes ☐ No					
If "Yes" to previous question, describe stream reach:					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Describe benefits and impacts to Wild & Scenic Rivers associated with the project.					
*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 4.1 Executive Order 11990 Wetlands [24 CFR 58.5(b)(2)]					
Project Name					
Owner Name					
Complete this table per Section 4.7 of the guidance for projects categorized as: CEST, FONSI.					
Complete this table in accordance with Section 5.2.7 of the guidance.					
Wetlands and Streams Figure Reference Number:					
Wetlands and Streams Information Appendix Reference (if applicable):					
Type of Proposed Action:					☐ Critical ☐ Non-Critical
Existing Conditions					
Are wetlands, as defined by Executive Order 11990, present on the project site and in the project area?					☐ Yes ☐ No
If so, discuss the type, quality, function, and relative importance of wetlands.					
Did a site visit occur?	☐ Yes ☐ No	If Yes, supply the date.			
Has the U.S. Fish and Wildlife service been contacted?					
Has NRCS's National Soil Survey been referenced?					
Have delineations occurred by a qualified wetlands scientist?	☐ Yes ☐ No	If Yes, supply the date.			
Does the project include wetland crossings?	☐ Yes ☐ No	If Yes, Complete Table 7.2.			
Is the 8-Step Process Required?	☐ Yes ☐ No	If Yes, Complete Table 7.3.			
Will new construction, as defined by Executive Order 11990, occur in wetlands?	☐ Yes ☐ No				
If yes, explain why practicable alternatives are not available.					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Total Acres Impacted from Table 5.7.2					

<i>Describe benefits and impacts to wetlands associated with the project.</i>		
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>		
<i>Sources Consulted (add more rows if needed)</i>	<i>Date</i>	<i>Reference(s)</i>

Table 4.2. Wetland Crossings			
Project Name			
Owner Name			
<i>Wetland Crossings (Add rows as needed; include all crossings even if impact is zero acres.)</i>			
Wetlands Crossing Figure Reference Number:			
Wetlands Crossing Information Appendix Reference (if applicable):			
# Keyed to Map	Diameter & Type of Sewer	Installation Method	Acres Impacted
Total Wetland Impacts (acres):			

Table 4.3. Wetlands – 8 Step Process Project Name Owner Name	
<i>Complete this table in accordance with Section 4.7 for projects resulting in new construction in Executive Order 11990 wetlands (§55.16).</i>	
Wetlands Figure Reference Number:	
Wetlands Appendix Reference (if applicable):	
<i>Complete the 8-step Process for all projects located in Wetlands (§50.20)</i>	
<i>Step 1: Is the proposed project in wetlands, as defined by Executive Order 11990?</i>	☐ Yes ☐ No
<i>Step 2: Involve the public in decision-making process (early public notice)</i> <i>Provide date of notice for early review:</i>	
<i>Provide name of publication for early review:</i>	
<i>Step 3: Determine if there is a practicable alternative. Identify and evaluate practicable alternatives to locating in the wetland, including alternative sites outside of the wetland.</i>	
<i>Step 4: Identify adverse and beneficial impacts.</i>	
<i>Step 5: Mitigate adverse impacts. Develop measures to minimize the impacts and restore and preserve the wetland.</i>	
<i>Step 6: Re-evaluate Alternatives.</i>	
<i>Step 7: Announce and explain decision to the public (final public notice).</i> <i>Provide date of notice of finding and a public explanation:</i>	
<i>Provide name of publication for notice of finding:</i>	

Step 8: Implement proposal with appropriate mitigation. .

Correspondence with U.S. Army Corps of Engineers

<i>Date</i>	<i>Action ID</i>	<i>Finding (Concurrence, Recommendations, Etc.)</i>	<i>Reference(s)</i>

Correspondence with U.S. Fish and Wildlife Service

<i>Date</i>	<i>Action ID</i>	<i>Finding (Concurrence, Recommendations, Etc.)</i>	<i>Reference(s)</i>

Table 5.1. Endangered Species [24 CFR 58.5(e)]			
Project Name			
Owner Name			
Complete this table per Section 4.9 of the guidance for projects categorized as: CEST, FONSI.			
Endangered Species Appendix Reference (if applicable):			
Existing Conditions			
Are federally listed T&E species present within the project site, the project area, or downstream from the project?			
☐ Yes ☐ No, a finding of No Effect can be made			
If Yes, list all federally listed T&E species located within the project site, in the project area, and downstream of the project site. Show approximate location(s) on the Environmental Features Figure.			
T&E Species Figure Reference Number (if applicable):			
Common Name	Scientific Name	Status	Approximate Location (e.g., 5 mi. NE of Project)
Discuss T&E species habitat.			
Will the project affect any of the federally listed T&E species?			
☐ Yes ☐ No, must obtain concurrence from the USFWS or for marine species NMFS			
If Yes, a Biological Survey must be provided to the USFWS, or for marine species NMFS, and Biological Opinion of "Not Likely to Jeopardize the Existence of" obtained.			
Impacts & Mitigation (Choose single most appropriate box for each category.)			
Construction Impacts		Operational Impacts	
No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐
Describe impacts to threatened & endangered species.			

Table 5.1. Endangered Species [24 CFR 58.5(e)] Project Name Owner Name		
<i>*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.</i>		
<i>Sources Consulted</i>	<i>Date</i>	<i>Reference(s)</i>
U.S. Fish & Wildlife Service		
National Marine Fisheries Service		
Other		

Table 6.1. Historic Preservation [24 CFR 58.5(a)]			
Project Name		Owner Name	
Complete this table per Section 4.12 of the guidance for projects categorized as: CEST, FONSI.			
Historic Preservation Figure Reference Number:			
Archaeological or Historical Area Information Appendix Reference:			
Consultation with NC Dept. of Natural and Cultural Resources			
As determined through consultation with NCDNCR – State Historic Preservation Office, will National Register listed or eligible properties be impacted?			☐ Yes ☐ No
Date of Correspondence:		NCDNCR Record Number:	
If yes, list these and show on a figure.			
Consultation with Catawba Indian Nation THPO (Statewide)			
For projects with ground disturbance, as determined through consultation with EBCI will National Register listed or eligible properties be impacted?			☐ Yes ☐ No
Date of Correspondence:		CIN Record Number:	
If yes, list these and show on a figure.			
Consultation with Eastern Band of Cherokee Indians THPO (See county list.)			
For projects with ground disturbance, as determined through consultation with EBCI will National Register listed or eligible properties be impacted?			☐ Yes ☐ No
Date of Correspondence:		EBCI Record Number:	
If yes, list these and show on a figure.			
Consultation with Tuscarora Nation of New York (See county list.)			
For projects with ground disturbance, has the Tuscarora Nation expressed interest in the project?			☐ Yes ☐ No
Date of Correspondence:		Record Number:	
If yes, list these and show on a figure.			
Consultation with Muscogee (Creek) Indian Nation (See county list.)			
For projects with ground disturbance, has the Muscogee (Creek) Indian Nation expressed interest in the project?			☐ Yes ☐ No
Date of Correspondence:		Record Number:	
If yes, list these and show on a figure.			
Name	Type	Location (e.g., 5 mi. NE of Project)	

Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
<i>No Impact Anticipated</i>	☐	<i>No Impact Anticipated</i>	☐	<i>No Impact Anticipated</i>	☐
<i>Potentially Beneficial</i>	☐	<i>Potentially Beneficial</i>	☐	<i>Potentially Beneficial</i>	☐
<i>Potentially Adverse</i>	☐	<i>Potentially Adverse</i>	☐	<i>Potentially Adverse</i>	☐
<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐
<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐
<i>Describe toxic substances that may be introduced to the environment. (Enter “none” if “no impact” is checked.)</i>					
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures</i>					
<i>Sources Consulted (add more rows if needed)</i>				<i>Date</i>	<i>Reference(s)</i>

Table 7.1. Air Quality [24 CFR 58.5(g)]					
Project Name					
Owner Name					
Complete this table per Section 4.13 of the guidance for projects categorized as: CEST, FONSI.					
Air Quality Information Appendix Reference (if applicable):					
Existing Conditions					
Discuss the general air quality and identify current sources of emissions from the project and surrounding area. Note whether odors have been a problem.					
Will open burning occur?		If Yes, describe what will be burned.			
☐ Yes ☐ No					
Is the project located in a non-attainment or maintenance area?					☐ Yes ☐ No
If Yes, is the project in conformance with the State Implementation Plan?		☐ Yes ☐ No	Date of Consultation with DAQ:		
If project is not in conformance with SIP, be sure to include any mitigation as discussed with DAQ					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Describe impacts associated with the project (Enter "None" if "No Impact" is checked).					
*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 8.1. Site Safety (24 CFR Part 51, Subparts C and D) Project	
Name	
Owner Name	
<i>Airport Hazards [24 CFR Part 51, Subpart D, 24 CFR 58.6(d)]</i>	
<i>Complete this portion of the table per Section 4.16.1 of the guidance for projects categorized as: Exempt, CENST, CEST, FONSI.</i>	
a) Is the project within 3,000 ft from the end of a civil airport runway?	☐ Yes ☐ No
b) Is the project within 2.5 miles from the end of a military airfield runway?	☐ Yes ☐ No
c) If "Yes" to a or b, will the project be located in a runway clear zone at a civil airport OR clear zone or accident potential zone at a military airfield?	☐ Yes ☐ No
d.) If "Yes" to a or b, will the project be located in a runway clear zone at a civil airport OR clear zone or accident potential zone at a military airfield ²⁶ .	☐ Yes ☐ No
d.) If "Yes" has the airport operator has provided written assurance to the effect that there are no plans to purchase the land involved with the project site (provide Record Number) ¹ ; or for projects in accident potential zones the project has been found to be compatible with the Airport Installation Compatibility Use Zone.	☐ Yes ☐ No Record Number:
Sources Consulted	Reference(s)
<i>Complete this portion of the table per Section 4.16.2 of the guidance for projects categorized as: CEST, FONSI.</i>	
<i>Explosive & Flammable Hazard Operations</i>	
d) Is this a construction or rehab/modernization project that will increase the number of people using a structure?	☐ Yes ☐ No
e) Is this a rehab/modernization project that will make a vacant building habitable?	☐ Yes ☐ No
f) If "Yes" to d or e, are there 100+ gallon above ground storage tanks (ASTs) storing common liquid industrial fuels, or any capacity ASTs storing hazardous liquids or gases that are not common liquid industrial fuels. 1 mile from, adjacent to, or visible from the project site?	☐ Yes ☐ No ☐ Not Applicable
g) if "Yes" to f, attach Acceptable Separation Distance documentation. Does the project require mitigation for hazards? ²⁷ If yes, describe.	☐ Yes ☐ No ☐ Not Applicable

²⁶ In accordance with 24 CFR 51.303 HUD funds cannot be used in runway clearzones or clearzones for construction, land development, community development, redevelopment, or provision of services or facilities that are frequently used or occupied by people.

²⁷ In accordance with 24 CFR 51.202(a) if a HUD-assisted project (as defined in 24 CFR Part 51 Subpart C) is located within a ASD the project must be rejected unless mitigation can be provided or already exists

Table 8.1. Site Safety (24 CFR Part 51, Subparts C and D)	
Project Name	
Owner Name	
Sources Consulted	Reference(s)
Contamination, Toxic Substances and Radioactive Materials	
Complete this portion of the table per Section 4.16.3 of the guidance for projects categorized as: CEST, FONSI.	
h) Does this project involve enclosed structures that are intended to be occupied at least 4 hours per day? If "Yes" continue to the questions below If "No" skip to question l	☐ Yes ☐ No
i) Does appropriate scientific data show that more than at least 10 radon tests have been conducted over the last 10 years and the average reading is below 4 pCi/L? If "Yes", go to l, and provide source and documentation If "No" proceed to j If "n/a", proceed to j	☐ Yes ☐ No ☐ N/A
j) Was testing completed that showed Radon levels at or above 4 pCi/L? If "Yes" continue to k and provide documentation If "No" skip to l and show documentation If "n/a" provide explanation of infeasibility and documentation of lack of data, and skip to l	☐ Yes ☐ No ☐ N/A
k) Has a Radon mitigation been proposed? Show proposed plan in appendix.	☐ Yes ☐ No
l) Is the project near an industry disposing of chemicals or hazardous waste?	☐ Yes ☐ No
m) Is the site on an EPA Superfund or CERCLA or state equivalent list?	☐ Yes ☐ No
n) Is the site located within 3,000 feet of a toxic or solid waste landfill?	☐ Yes ☐ No
o) Does the site have an underground storage tank?	☐ Yes ☐ No
p) Does the project require a Phase I ASTM or Phase II ASTM report? If "Yes," include a copy and provide the Appendix Reference:	☐ Yes ☐ No
r) Does the project require mitigation or remediation measures for toxins? If "Yes", describe.	☐ Yes ☐ No

Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Describe impacts associated with the project (Enter "None" if "No Impact" is checked).					
*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 9.1. Coastal Resources [24 CFR 58.5(c), 24 CFR 58.6(c)] Project Name Owner Name		
<i>Complete the section below per Section 4.17.1 of the guidance for projects categorized as: CEST, FONSI.</i>		
CAMA [24 CFR 58.5(c)]		
<i>Is the project in a CAMA county? If "No," skip the rest of the table.</i>	☐ Yes ☐ No	
<i>Does the project involve new construction, land conversion, major rehabilitation, and substantial improvement activities?</i>	☐ Yes ☐ No	
<i>If "Yes" to a and b, discuss consistency review with Division of Coastal Management.</i>		
<i>Sources Consulted</i>		<i>Reference(s)</i>
Coastal Barriers [24 CFR 58.6(c)]		
<i>Complete the section below per Section 4.17.2 of the guidance for projects categorized as: Exempt, CENST, CEST, FONSI.</i>		
<i>c) Is project located within a CBRS community? If "Yes," attach a FIRM map indicating whether construction activity occurs in a CBRS and provide documentation of US Fish and Wildlife Service approval.</i>	☐ Yes ☐ No	
<i>Sources Consulted (add more rows if needed)</i>	<i>Date</i>	<i>Reference(s)</i>

Table 10.1. Topography					
Project Name					
Owner Name					
Complete this table per Section 4.1 of the guidance for projects categorized as: FONSI.					
Topography Figure Reference Number (if applicable):					
Topography Appendix Reference (if applicable):					
Existing Conditions					
Physiographic Province:	☐ Coastal Plain	☐ Piedmont	☐ Mountains		
Minimum Elevation in Project Area (MSL):		Maximum Elevation in Project Area (MSL):			
Discuss topographical and geological features.					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Describe benefits and impacts to topography, including slope, associated with the project.					
*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 11.1. Soils Project Name Owner Name					
<i>Complete this table per Section 4.3 of the guidance for projects categorized as FONSI.</i>					
Soils Figure Reference Number:					
Soils Information Appendix Reference (if applicable):					
Existing Conditions					
<i>Describe the types of soil. Provide a soils figure in the EID.</i>					
Is soil contamination present?					☐ Yes ☐ No
Does soil type present any constraints to the project?					☐ Yes ☐ No
<i>If yes to any of the three questions above of the above, explain.</i>					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Will soil be moved offsite?		☐ Yes ☐ No		Quantity (yd ³):	
Will soil be contaminated?		☐ Yes ☐ No			
<i>Describe benefits and impacts to soils associated with the project</i>					
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 12.1. Land Use Project Name Owner Name					
<i>Complete this table per Section 4.5 of the guidance for projects categorized as: FONSI.</i>					
Land Use Figure Reference Number (if applicable):					
Land Use Information Appendix Reference (if applicable):					
Existing Conditions					
Discuss the current land use for the project site. - <i>Land use is how the project site is currently being used.</i>					
Discuss the current land use for the broader project area.					
Discuss the zoning district or classification for the project site. - <i>Zoning is a designation given by a local municipality for future and current use of the land.</i>					
Discuss the zoning for the project area.					
Impacts					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Land Use Impacts		Zoning Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Describe benefits and impacts to land use associated with the project.					
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>					

<i>Sources Consulted (add more rows if needed)</i>	<i>Date</i>	<i>Reference(s)</i>

Table 13.1. Streams and Water Resources					
Project Name					
Owner Name					
Complete this table per Section 4.8 of the guidance for projects categorized as: FONSI.					
Water Resources Appendix Reference (if applicable):					
Existing Conditions					
Sole Source Aquifers:		Sole source aquifers are not present in NC.			
River basin(s) for project:					
List all stream(s) found within the project site and greater project area.					
Name	Classification	Impaired?		Reason for Impairment	
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
Discuss groundwater quality and quantity.					
Discuss surface water quality.					
LGU water supply(ies):					
Impacts					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Stream Crossings: Total Acres Impacted from Table 5.8.1					
Describe benefits and impacts to water resources associated with the project.					
*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 13.2. Stream Crossings			
Project Name			
Owner Name			
Stream Crossing Figure Reference Number:			
Stream Crossing Information Appendix Reference (if applicable):			
<i>Stream Crossings (Add rows as needed; include all crossings even if impact is zero feet.)</i>			
# Keyed to Map	Diameter & Type of Sewer	Installation Method	Linear Feet Impacted
Total Stream Impacts (feet):			

Table 14.1. Wildlife, Natural Vegetation, and Forest Resources					
Project Name					
Owner Name					
Complete this table per Section 4.10 of the guidance for projects categorized as: FONSI.					
Wildlife, Natural Vegetation, and Forest Resources Information Appendix Reference (if applicable)					
Existing Conditions					
Discuss the aquatic and terrestrial wildlife, vegetation, and forest resources present in the project site and project area.					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
Will the project require clearing of forest resources?		☐ Yes ☐ No	If Yes, Acres Impacted:		
Will the project require clearing of natural vegetation?		☐ Yes ☐ No	If Yes, Acres Impacted:		
Describe impacts associated with the project (Enter "None" if "No Impact" is checked).					
*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 15.1. Community Facilities Project Name Owner Name					
<i>Complete this table per Section 4.11 of the guidance for projects categorized as: FONSI.</i>					
Community Facilities Figure Reference Number:					
Community Facilities Information Appendix Reference:					
Existing Conditions					
<i>Are community facilities such as schools, airports, health care facilities, parks, etc. found adjacent to or in the project area? (See guidance for full list)</i>					☐ Yes ☐ No
<i>If yes, list these areas and show on a figure.</i>					
Name		Type		Location (e.g., 5 mi. NE of Project)	
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
No Impact anticipated	☐	No Impact anticipated	☐	No Impact anticipated	☐
Potentially beneficial	☐	Potentially beneficial	☐	Potentially beneficial	☐
Potentially adverse	☐	Potentially adverse	☐	Potentially adverse	☐
Requires Mitigation	☐	Requires Mitigation	☐	Requires Mitigation	☐
Requires Modification	☐	Requires Modification	☐	Requires Modification	☐
<i>Will the project increase the number of school-aged children?</i>					☐ Yes ☐ No
<i>If "Yes", do potentially affected schools have adequate capacity and safe access to serve these additional students?</i>					☐ Yes ☐ No
<i>If "Yes" to both of the above, explain measures that will be taken to accommodate additional students.</i>					
<i>Describe impacts associated with the project (Enter "None" if "No Impact" is checked).</i>					
<i>*If "Requires Mitigation" or "Requires Modification" is checked, describe such measures.</i>					

Table 15.1. Community Facilities Project Name Owner Name		
<i>Sources Consulted (add more rows if needed)</i>	<i>Date</i>	<i>Reference(s)</i>

Table 16.1. Noise Levels and Noise Abatement and Control (24 CFR Part 51, Subpart B)					
Project Name					
Owner Name					
<i>Complete this table per Section 4.14 of the guidance for projects categorized as: FONSI.</i>					
Noise Level Information Appendix Reference (if applicable):					
Existing Conditions					
<i>Discuss the current noise levels for the project site and project area.</i>					
<i>Does the LGU have noise ordinances in place?</i>			☐ Yes ☐ No		
<i>If yes, describe.</i>					
<i>Will the project directly support construction of new housing or other noise sensitive development?</i>					☐ Yes ☐ No
<i>If "Yes" are any of the following true:</i> • <i>Project is located within 5 miles of a civil airport.</i> • <i>Project is located within 15 miles of a military airfield.</i> • <i>Project is located within 1,000 ft of a major highway or busy road.</i> • <i>Project is located within 3,000 ft of a railroad.</i> <i>If "Yes" for any of these, then attach Day/Night Noise Level calculator results.</i>					☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
Will the noise sensitive development be exposed to Normally Unacceptable (>65DNT to 75 DNL) or Unacceptable (>75 DNL) noise levels? ☐ Yes ☐ No, attach the Noise Assessment					
<i>If Normally Unacceptable, complete an Environmental Assessment and provide mitigation to reduce interior noise levels to $\leq$ 45 DNL, and outdoor noise levels for designated gathering areas to $\leq$ 65 DNL.</i>					
<i>If Unacceptable, an Environmental Impact Statement must be completed unless the project meets the conditions for waiver of the EIS requirement by the Certifying Officer.</i>					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐
<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐
<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐
<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐
<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐
<i>Describe impacts associated with the project (Enter "None" if "No Impact" is checked).</i>					

Table 16.1. Noise Levels and Noise Abatement and Control (24 CFR Part 51, Subpart B) Project Name Owner Name		
<i>*If Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>		
Sources Consulted (add more rows if needed)	Date	Reference(s)

Table 17.1. Energy Consumption Project Name Owner Name					
<i>Complete this table per Section 4.15 of the guidance for projects categorized as: FONSI.</i>					
Energy Consumption Appendix Reference (if applicable):					
<i>Will the project increase energy consumption?</i>					☐ Yes ☐ No
<i>If “Yes” explain the increase in energy consumption.</i>					
<i>Will the project improve energy consumption?</i>					☐ Yes ☐ No
<i>If “Yes” explain the decrease in energy consumption and place any calculations in an appendix.</i>					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐
<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐
<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐
<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐
<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐
<i>Describe energy consumption impacts.</i>					
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>					
Sources Consulted (add more rows if needed)				Date	Reference(s)

Table 18.1. Environmental Design Project Name Owner Name					
<i>Complete the section below per Section 4.18 of the guidance for projects categorized as: FONSI.</i>					
Existing Conditions					
<i>Describe environmental design of the project including visual quality, coherence, diversity, compatible use, and scale.</i>					
Impacts & Mitigation (Choose single most appropriate box for each category.)					
Construction Impacts		Operational Impacts		SCI	
<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐	<i>No Impact anticipated</i>	☐
<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐	<i>Potentially beneficial</i>	☐
<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐	<i>Potentially adverse</i>	☐
<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐	<i>Requires Mitigation</i>	☐
<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐	<i>Requires Modification</i>	☐
<i>Describe benefits and impacts to environmental design associated with the project.</i>					
<i>*If “Requires Mitigation” or “Requires Modification” is checked, describe such measures.</i>					
Sources Consulted (add more rows if needed)				Reference(s)	