

Marine Mammal Protection Act Incidental Take Authorization

Bureau POC Name:		
Action Bureau POC Email:	<input type="text"/>	
Action Bureau POC Phone Number:	<input type="text"/>	
Milestone 1:	Milestone Name:	Initial application received
	Check the box if Not Applicable:	<input type="checkbox"/>
	Target Completion Date:	<input type="text"/>  28
	Completion Date:	<input type="text"/>  28
Milestone 2:	Milestone Name:	Completed application received
	Check the box if Not Applicable:	<input type="checkbox"/>
	Target Completion Date:	<input type="text"/>  28
	Completion Date:	<input type="text"/>  28
Milestone 3:	Milestone Name:	Issuance of decision for permit/approval.
	Check the box if Not Applicable:	<input type="checkbox"/>
	Target Completion Date:	<input type="text"/>  28
	Completion Date:	<input type="text"/>  28
Milestone 4:	Milestone Name:	Notice to proceed
	Check the box if Not Applicable:	<input type="checkbox"/>
	Target Completion Date:	<input type="text"/>  28
	Completion Date:	<input type="text"/>  28
Milestone 5:	Milestone Name:	Review Terminated with no decision
	Check the box if Not Applicable:	<input type="checkbox"/>
	Target Completion Date:	<input type="text"/>  28
	Completion Date:	<input type="text"/>  28

