

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	<input type="button" value="Up"/>