

ENVIRONMENTAL ASSESSMENT QUESTIONNAIRE

FACILITY NAME: _____ FACILITY ID#: _____

YOUR NAME: _____ DATE: _____

DESCRIPTION OF PROPOSED PROJECTS: (What you are planning to do.)

DESCRIPTION OF THE BENEFITS AND PURPOSE OF THE PROPOSED ACTION: (Why are you doing this project?)

PHYSICAL ENVIRONMENT:

(Answer each question to the best of your knowledge.
Explain any "Yes" answer on a separate sheet of paper.)

- | | | |
|--|-----|----|
| 1. <u>TOPOGRAPHY</u> : Are there unusual geologic features? | Yes | No |
| 2. <u>GEOLOGY AND SOIL QUALITY, STABILITY AND MOISTURE</u> : | | |
| Are fragile, compactible or unstable soils present? | Yes | No |
| Are there special reclamation considerations? | Yes | No |
| 3. <u>WATER QUALITY, QUANTITY AND DISTRIBUTION</u> : | | |
| Are important surface or groundwater resources present? | Yes | No |
| Is there potential for violation of ambient water quality standards, drinking water maximum
contaminant levels, or degradation of water quality? | Yes | No |
| 4. <u>AIR QUALITY</u> : Will pollutants or particulate be produced? | Yes | No |
| Is the project influenced by air quality regulations or zones (Class I airshed)? | Yes | No |
| 5. <u>DEMANDS ON ENVIRONMENTAL RESOURCES OF LAND, WATER, AIR OR ENERGY</u> : | | |
| Will the project use resources that are limited in the area? | Yes | No |
| Are there other activities nearby that will affect the project? | Yes | No |
| 6. <u>IMPACTS ON OTHER ENVIRONMENTAL RESOURCES</u> : | | |
| Are there other studies, plans or projects on this tract? | Yes | No |
| 7. <u>TERRESTRIAL, AVIAN AND AQUATIC LIFE AND HABITATS</u> : | | |
| Is there substantial use of the area by important wildlife, birds, or fish? | Yes | No |
| 8. <u>SAGE GROUSE HABITAT CONSERVATION PROGRAM CERTIFICATION</u> : | | |
| Is the proposed work located in core, general or connectivity sage grouse habitat, as designated
by the Sage Grouse Habitat Conservation Program (Program) at https://sagegrouse.mt.gov ? | Yes | No |
| If yes, attach the documentation from the Program showing compliance with Executive Order
12-2015 and the Program's recommendations, if any. This process can take between 40-65 days. | | |
| 9. <u>VEGETATION COVER, QUANTITY AND QUALITY</u> : | | |
| Will vegetative communities be permanently altered? | Yes | No |
| Are any rare plants or cover types present? | Yes | No |
| 10. <u>UNIQUE, ENDANGERED, FRAGILE OR LIMITED ENVIRONMENTAL RESOURCES</u> : | | |
| Are any federally listed threatened or endangered species or identified habitat present? | Yes | No |
| Any wetlands? | Yes | No |
| Any species of special concern? | Yes | No |
| 11. <u>HISTORICAL AND ARCHEOLOGICAL SITE</u> : | | |
| Are any historical, archeological or paleontological resources present? | Yes | No |

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12. **ASTHETICS:** Is the project on a prominent topographical feature? Yes No
 Will it be visible from populated or scenic areas? Yes No
 Will there be excessive noise, light or odors? Yes No
13. **AGRICULTURE:** Will grazing lands, irrigation waters or crop production be affected? Yes No

HUMAN ENVIRONMENT:

1. **SOCIAL STRUCTURES AND MORES:**

Is some disruption of native or traditional lifestyles or communities possible? Yes No

2. **CULTURAL UNIQUENESS AND DIVERSITY:**

Will the action cause a shift in some unique quality of the area? Yes No

3. **DENSITY AND DISTRIBUTION OR POPULATION AND HOUSING:**

Will the project add to the population and require additional housing? Yes No

4. **HUMAN HEALTH AND SAFETY:** Will this project add to health and safety risks in the area? Yes No

5. **COMMUNITY AND PERSONAL INCOME:** Will the facility generate or degrade income? Yes No

6. **QUANTITY AND DISTRIBUTION OF EMPLOYMENT:**

Will the project create, move or eliminate jobs? Yes No

If so, estimate types and number: _____

7. **LOCAL AND STATE TAX BASE REVENUES:** Will the project create or eliminate tax revenue? Yes No

8. **DEMAND FOR GOVERNMENT SERVICES:** Will substantial traffic be added to existing roads? Yes No

Will other services (fire protection, police, schools, etc.) be needed? Yes No

9. **INDUSTRIAL, COMMERCIAL AND AGRICULTURAL ACTIVITIES AND PRODUCTION:**

Will the project add to or alter these activities? Yes No

10. **ACCESS TO AND QUALITY OF RECREATIONAL AND WILDERNESS ACTIVITIES:**

Are wilderness or recreational areas nearby or accessed through this tract? Yes No

Is there recreational potential within the tract? Yes No

11. **LOCALLY ADOPTED ENVIRONMENTAL PLANS AND GOALS:**

Are there state, county, city, USFS, BLM, tribal, zoning or management plans in effect? Yes No

12. **TRANSPORTATION:** Will the project affect local transportation networks and traffic flows? Yes No

13. **PUBLIC INVOLVEMENT:** Describe how you think the public might become involved:

14. **ALTERNATIVES CONSIDERED:** List any alternatives to this project:

I certify that the information presented above is accurate and complete to the best of my knowledge.

Signature

Date

FOR STATE USE ONLY

EA Questionnaire Reviewed _____

EA Not Required _____ EA Required _____

Reviewer

Date