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| **SERVIÇO DE LICENCIAMENTO AMBIENTAL** |
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| **DADOS DO REQUERIMENTO** |

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|  Licença Prévia |  Prorrogação | | | |
|  Licença de Instalação |  Ampliação |  Prorrogação | | |
|  Licença de Operação |  Por Proc. Corretivo |  Por Proc. Simplificado |  Ampliação |  Renovação |
|  Alteração Contratual/ Titularidade |  CNPJ |  Endereço |  Denominação/Razão Social | |

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|  Certidão Ambiental |  Dispensa de Licenciamento Ambiental |  Inexigibilidade Licenciamento Ambiental |

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|  Outros | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **FASE DO EMPREENDIMENTO** | | | |
|  Planejamento |  Instalação |  Operando | Data de Abertura: \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_ |
| Licença anterior | Tipo/Nº/Ano:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Processo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Protocolo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ |

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| **DADOS DO EMPREENDIMENTO**  (Local que a atividade econômica ou similar é/será exercida) | | | |
| Pessoa Física/Jurídica | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| CPF/CNPJ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Endereço (Av/Pça/Rod/Rua) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  | Nº \_\_\_\_\_\_\_\_\_ Complemento: \_\_\_\_\_\_\_ | Bairro/Distrito: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | CEP: \_\_\_\_\_\_\_\_\_\_\_ |

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| Telefone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | E-mail.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Coordenadas Geográficas UTM (Sirgas 2000) 24k | X \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Y \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **ENDEREÇO DE CORRESPONDÊNCIA** | | | |
| Contato | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Endereço (Av/Pça/Rod/Rua) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  | Nº \_\_\_\_\_\_\_\_\_ Complemento: \_\_\_\_\_\_ | Bairro/Distrito \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | CEP: \_\_\_\_\_\_\_\_\_\_\_\_ |

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| **DADOS DA ATIVIDADE ECONÔMICA**  (Descrição código Consema e descrição da CNAE) | | | |
| Código/Descrição CNAE | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Código/Descrição Consema | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Enquadramento Consema | Porte: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Potencial: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Classe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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|  **OPTO** por receber por Endereço Eletrônico os expedientes emitidos pela Secretaria Municipal de Meio Ambiente |
| Se **PROCURADOR**, apresentar Procuração com Firma Reconhecida e cópia simples documento pessoal com foto do Procurador. |
| Cachoeiro de Itapemirim – Espirito Santo, \_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de \_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Assinatura do Representante Legal |