BUREAU OF OCEAN ENERGY MANAGEMENT (BOEM)

NEW OR CHANGED PROGRAM DELEGATIONS[1]

CURRENT DELEGATION(S) OF AUTHORITY AND CITATION(S): _____

_____

_____

_____

PROPOSED NEW DELEGATION(S) OR CHANGE TO DELEGATION(S) OF AUTHORITY: _____

_____

_____

_____

REASON(S) FOR PROPOSING THE NEW OR CHANGED DELEGATION: (Please include whether the delegation of authority is related to an Executive Order, statute, regulation, Departmental or BOEM Manual chapter, and/or other authority.) : _____

_____

_____

_____

EFFECTIVE DATE (OR PROPOSED DATE) FOR DELEGATION CHANGE: _____

DOES THE BOEM GENERAL PROGRAM AUTHORITY OR THE GENERAL ADMINISTRATIVE DELEGATION AUTHORITY (218 DM 1 OR 218 DM 2) REQUIRE REVISION TO ALIGN WITH THIS PROPOSED DELEGATION CHANGE? _____

FOR EMERGENCY DELEGATIONS[2] **ONLY:**

DURATION OF PROPOSED EMERGENCY DELEGATION: (A) TO EXPIRE ON_____**OR (B) NOT TO EXCEED**_____**OR (C) OTHER** _____ .

LIMITATIONS OF THE PROPOSED DELEGATION OF AUTHORITY (I.E., FOR A SINGLE LEASE SALE): _

_____

_____

_____

DATE OF REQUEST: _____

NAMES(S) AND TITLE(S) OF REQUESTOR(S): _____

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[1] Use this form to propose new, revised, or emergency delegations or re-delegations, following the directions in Section 2.8 Procedures of BOEMM Chapter 218.2, Program Delegations.

[2] For Emergency Delegations, include information on the nature of the emergency in this space. If further information is needed, attach additional pages. An emergency is defined as a "serious, unexpected or often dangerous situation requiring immediate actions (such as imminent danger to life or health)."

DIRECTIVES OFFICER SIGNATURE

DIRECTOR'S SIGNATURE AND DATE:

All proposed delegation changes should be submitted to the Directives Officer (DO) in the Office of Policy, Regulation and Analysis. Delegations are effective upon signature of the Director. A signed copy of this form must be submitted to the Directives Coordinator for addition to the Program Delegations Handbook, posting to the BOEM Manual webpage, and for coordination with the BOEM Records Officer.

DELEGATION NUMBER _____   DTS # _____

Delegation number format is YYYY-####. This number is assigned by the Directives Coordinator.