REPORT OF CHANNEL CONDITIONS
(For Channels 400 Feet Wide or Greater)
For use of this form, see EP 1130-2-520; the proponent agency is CECW-OD

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DATE *(YYYYMMDD)*

TO	FROM

RIVER/HARBOR NAME AND STATE	MINIMUM DEPTHS IN EACH 1/4 WIDTH OF CHANNEL ENTERING FROM SEAWARD

NAME OF CHANNEL	DATE OF SURVEY *(YYYYMMDD)*	AUTHORIZED PROJECT WIDTH *(feet)*	AUTHORIZED PROJECT LENGTGH *(miles)*	AUTHORIZED PROJECT DEPTH *(feet)*	LEFT OUTSIDE QUARTER *(feet)*	MID-CHANNEL LEFT INSIDE QUARTER *(feet)*	MID-CHANNEL RIGHT INSIDE QUARTER *(feet)*	RIGHT OUTSIDE QUARTER *(feet)*

REMARKS *(Continue on additional sheets if needed)*

ENG FORM 4020, NOV 1990   PREVIOUS EDITIONS ARE OBSOLETE.