Wes Moore
Governor
Aruna Miller
Lt. Governor



Rebecca L. Flora, AICP
Secretary
Kristin R. Fleckenstein
Deputy Secretary

November 5, 2026

Ms. Grace Filson
Community Engagement Coordinator
ShoreRivers
114 S Washington St Suite 301
Easton, MD 21601

STATE CLEARINGHOUSE REVIEW PROCESS

State Application Identifier: MD20261104-0727
Project Description: ShoreRivers: Watershed Discovery Expeditions
Project Location: Caroline County, Dorchester County, Kent County, Queen Anne's County and Talbot County
Clearinghouse Contact: Sophia Richardson

Dear Ms. Filson:

Thank you for submitting your project for intergovernmental review. Participation in the Maryland Intergovernmental Review and Coordination (MIRC) process helps ensure project consistency with plans, programs, and objectives of State agencies and local governments.

Notice of your application is being provided to State and local public officials through the ***Intergovernmental Monitor***, which is a database of projects received by the State Clearinghouse for Intergovernmental Assistance. This information may be viewed at http://apps.planning.maryland.gov/emircpublic/. The project has been assigned a unique State Application Identifier that should be used on all documents and correspondence.

A "Project Status Form" has been enclosed and should be completed and returned after you receive notice that your project was approved or not approved.

All MIRC requirements have been met in accordance with Code of Maryland Regulations (COMAR 34.02.01.04-.06) and this concludes the review process for the above referenced project. If you need assistance or have questions, contact the State Clearinghouse staff noted above at 410-767-4490 or through e-mail at sophia.richardson@maryland.gov. Thank you for your cooperation with the MIRC process.

Sincerely,

Jason Dubow, Director
Research, Review and Policy Division

JD:SR
Enclosure(s)

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PROJECT STATUS FORM

Please complete this form and return it to the State Clearinghouse at mdp.clearinghouse@maryland.gov upon receipt of notification that the project has been approved or not approved by the approving authority.

TO: **Maryland State Clearinghouse**
Maryland Department of Planning

DATE: _____
(Please fill in the date form completed)

FROM: _____
(Name of person completing this form.)

PHONE: _____-____-_____
(Area Code & Phone number)

RE: **State Application Identifier:** **MD20261104-0727**
Project Description: ShoreRivers: Watershed Discovery Expeditions

PROJECT APPROVAL			
This project/plan was:	☐ **Approved**	☐ **Approved with Modification**	☐ **Disapproved**
Name of Approving Authority: _____			**Date Approved:** _____

FUNDING APPROVAL			
The funding (if applicable) has been approved for the period of: _____, 202____ **to** _____, 202____ **as follows:**			
Federal $: _____	**Local $:** _____	**State $:** _____	**Other $:** _____