

APPLICATION for SOIL EROSION and SEDIMENTATION CONTROL PERMIT

Make Checks Payable to **St. Joseph County CD**

Please indicate how you want to receive the permit:
 Mail to applicant Mail to landowner (4A)
 Hold in office Fax a copy to applicant

OFFICE USE	Permit No. _____
Date Rec'd _____	Date Issued _____
Fee _____	Expiration _____

1. APPLICANT INFORMATION

Name _____ Landowner -or- Designated Agent (also fill out 4A)
 Address _____ City _____ State/Zip _____
 Telephone # _____ Cell Number _____ Fax Number _____

2. PROJECT LOCATION

A. Township _____ Section _____ City/Village _____
 B. Address of Property _____ Is address visible? yes no
 C. Subdivision _____ Lot No. _____ Tax ID (if known) _____
 D. Names of roads at nearest intersection _____
 E. Is there another building on the site? yes no If yes, color and style of building? _____
 F. Describe adjacent houses or buildings _____

3. PROPOSED EARTH CHANGE

A. Project Type: House Addition Garage Deck Lot Clearing Commercial Bldg Fill Placement
 Septic Seawall Dredge Pond Demolition Road Garage – type _____
 B. Describe Project _____
 C. Number of Buildings _____ Does the work include: well septic driveway parking
 D. Size of Area Disturbed (include stockpile areas and temporary roads):
 Less than 225 square feet Less than 1 acre (208 x 208 ft) One acre or more – total acres or sq ft _____
 E. Names of Lakes, Streams, or County Drains within 500 ft _____
 F. Estimated Distance from Worksite to Nearest Lake, Stream, or Drain _____
 G. Projected Start Date _____ Projected Completion Date _____

4. PARTIES RESPONSIBLE FOR EARTH CHANGE

A. Name of Landowner (if not provided in section 1 above) _____
 Address _____ Phone _____
 City _____ State/Zip _____
 B. Excavating Contractor _____ Phone _____
 Address _____
 C. General Contractor (if not provided) _____ Phone _____
 Address _____
 D. Which party assumes responsibility for *Post Construction* site stabilization (final grading and planting)?
 Landowner General Contractor Excavator Landscape Contractor _____

OVER >>

5. SOIL EROSION AND SEDIMENTATION CONTROL PLAN

(Refer to Rule 323.1703)

A. Which measures will be in place before and during construction?

- silt fence (trenched in) selective grading berms loose straw mulch
- temporary seeding check dams natural vegetation rolled mulch blanket
- sediment basin diversions other _____

B. *Controls Required as a Condition of this Permit _____

*(To be completed by SESC staff)

C. Estimated Cost of Temporary Erosion and Sediment Control _____

D. Permanent Erosion Control Measures (to be installed within 5 days of final grade):

- hydro seeding seed sod mulch gravel
- rock riprap pavement curb basin other _____

6. SUBMIT A SITE PLAN CONTAINING THE FOLLOWING ON ONE OR MORE MAPS:

- Site **location sketch** showing access roads and water bodies (space provided below)
- Construction site plan with property lines and **building footprint** clearly marked
- Predominant **features of the land** (hills, wetlands, existing buildings, slopes, driveways)
- Direction of **slope or contour** lines
- Indicate outer **limit of excavation** including stockpiles and stump grubbing
- A **schedule** of earth changes – timing and sequence
- Location of all proposed **erosion control measures**

7. PERFORMANCE DEPOSIT (If an additional escrow amount is required.)

Amount Required \$ _____ Cash Certified Check Irrevocable Letter of Credit Surety Bond

Name of Surety Company _____

Address _____

City/State/Zip Code _____ Area Code/Telephone No. _____

8. SIGN THE APPLICATION

Space for site location sketch

I affirm that the above information is accurate and that I will conduct the above described earth change in accordance with Part 91, Soil Erosion and Sedimentation Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, local ordinances, and the documents accompanying this application.

Landowner's Signature _____

OR Designated Agent _____

Print Name _____ Date _____

(Designated agent must have a written statement from landowner authorizing him/her to secure a permit in the landowner's name)

- Please review this form for changes and requirements added by permitting staff during processing.
- It is your responsibility to request a renewal of this permit if site is not stabilized before the expiration date.
- Obtain all necessary permits from state and local governments prior to construction.
- Call the Conservation District at (269) 467-6336 ext. 5 when construction and stabilization are complete.

COMPLETED APPLICATION MAY BE MAILED OR BROUGHT TO THE ST. JOSEPH CO. CONSERVATION DISTRICT, 693 E. MAIN ST., CENTREVILLE, MI 49032 HOURS: MON-FRI 8-4:30