

CITY OF MT. PLEASANT

STORM WATER APPROVAL APPLICATION

OFFICE USE ONLY

Review Number
Approval Date
Disapproved <input type="checkbox"/>
Modification Requested <input type="checkbox"/> Yes
Check <input type="checkbox"/> No. <input type="checkbox"/> Cash

1. APPLICANT (Please check if applicant is the landowner or designated agent.*)

Name _____ Landowner Designated Agent

Address _____

City _____ State _____ Zip Code _____ Area Code/Telephone Number _____

2. PROJECT LOCATION

Address _____ City _____ Tax ID Number _____

Township _____ Section _____ Subdivision _____ Lot No. _____

3. PROPOSED PROJECT Project Type: Small addn/garage Service facilities Industrial Residential

Describe project: Subdivision Commercial _____

SIZE OF DEVELOPMENT:

AREA:

Acres _____

Sq.Ft. _____

LENGTH:

Miles _____

Feet _____

Name of and Distance (feed) to Drainage Outlet _____ Start Date of Project _____ Date Project Completed _____

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4. STORMWATER CONTROL PLAN

One complete set of plans and calculations must be attached.

Plan preparer's name and telephone number _____ () _____

5. PARTIES RESPONSIBLE FOR PROJECT

(A) Name of Landowner (if not provided in box number 1 above)

Address _____

City _____ State _____ Zip _____ Area Code/Telephone Number _____

(B) Name of Individual "On Site" Responsible for Project and Company Name

Address _____

City _____ State _____ Zip _____ Area Code/Telephone Number _____

6. PERFORMANCE DEPOSIT

OFFICE USE ONLY

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

I (we) affirm that the above information is accurate and that I (we) will conduct the above project in accordance with the Natural Resource and Environment Protection Act, 1994 PA 451, as amended, applicable State and Local ordinances, and the documents accompanying this application. I hereby authorize the reviewing agency to inspect this project site for conformance. I understand that payment of the fee does not guarantee an approval will be issued.

Landowner's Signature	Print Name	Date
Designated Agent's Signature	Print Name	Date