## STORMWATER MANAGEMENT AND SEDIMENT CONTROL PERMIT APPLICATION

Permittee Name:	Project Name/Type						
Address of Proposed Activity _		Township					
Perm. Parcel No	Subdivision		Sublot No				
Permittee Contact Data:	Email						
Office Tel							
Mailing Address	City		State	Zip			
Property Owner Data: □ c							
Name		Phone					
Mailing Address	City		State	Zip			
<u>Contractor Data:</u> □ check							
Name	Company_						
Office Tel	Cell		Fax				
Mailing Address	City		State	Zip			
PURPOSE OF PROPOSED A			•				
Single Family Residential	Multi-Family Residential		Commer	cial Project			
Subdivision w/Public Street	Subdivision w/Private Str	reet	Other				
A SITE PLAN drawn to scale incl submitted with this application: proposed topographic elevations outlet locations, and soil erosion applicable Medina County regula	Parcel boundaries, proposed s, drainage features (including n and sediment control measu	l construction culverts and	n, floor elevat d swales), sep	ions, existing and tic system and			
1 <sup>st</sup> Floor Building Area	Parking Lot Area	Drivew	ay Dimensic	ns			
Walkout Basement? ☐ Yes ☐	□ No Other Data						
For Commercial/Multi-Family F	Projects: Disturbed Area (SF	or acres)					
NOTE: For Single Family Reside prior to initial site inspection to			_				
By signing below, I certify that: 1) to apply for this permit on behalf of Engineer's Office personnel to ac 4) the property owner(s) and contaware that additional inspection for aware that they are ultimately respayment of any outstanding fees.	the above information is corre- of the property owner(s); 3) per cess the site for inspection pur tractor will be aware of the app ees may be charged to the per sponsible for proper completion	ct; 2) I am the rmission is groses as need permit mittee; and 6 of work as s	e property owr anted to Medi eded for the do and plan requ t) the property hown on the a	ner or am authorized na County uration of the permit irements; 5) I am owner(s) is/are			
Owner/Contractor/Agent Signa	ature			oate			
Owner/Contractor/Agent Printe	ed Name						

Address of Proposed Activity				Contractor				
Application Received By				_Date APPLICATION NUMBER				
Site Plan Received □Yes □No				Permit Fee Received □Yes □No Amount Receipt #				eipt #
FEMA	Floodp	lain □`	Yes □No	Elevation Cert	ification Forr	n Required	□Yes □	No
100-y	ear Floo	d Eleva	tion	Minimum	Required Lov	vest Floor Ele	evation	
Floodplain Category:		:	•				loodplain	
in Foundation per							er	
Locate	ed in EP	A Phas	e II Urbani	zed Area □Yes □	□No			
Applica	ation Ap	proved I	Ву	_ Date	Conditions	s Attached?	□Yes	⊐No
Date	From	То	Employee	Work Performed				Total Time
	1							
	<u> </u>							
	1							
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