

# EROSION CONTROL PERMIT APPLICATION

## Applicant Contact Information

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

## Project Information

Type of Construction: (Residential/Commercial): \_\_\_\_\_

Address: \_\_\_\_\_

Parcel & Lot #: \_\_\_\_\_

Disturbed Area (ac): \_\_\_\_\_

Date of land disturbing activity: \_\_\_\_\_

## Applicant agrees to the following items:

1. Call One-Call before digging 811 or 1-800-351-1111 and allow 3 business days before digging.
2. Install and maintain in proper working order, erosion control measures as needed to prevent sedimentation from leaving the construction site.
3. Remove any sediment and or aggregate discharged onto streets immediately.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date