

STORMWATER MANAGEMENT POST CONSTRUCTION & CONSTRUCTION SITE EROSION CONTROL APPLICATION

Chippewa County, 711 N. Bridge Street Chippewa Falls, WI 54729
Land Conservation & Forest Management (715) 726-7920

At some sites, a permit for construction site erosion control will be required, but a permit for post-construction stormwater management may not be required. For other sites, a concurrent permit for both construction site erosion control and post-construction stormwater management may be required. Any site disturbing one or more acres of land will require a stormwater permit

SECTION A: Project Information:

Project Name: _____ Property Address: _____ (If Available)
Project Location: ____ ¼, Section ____, Township ____ North, Range ____ West
Municipality: _____ Parcel Number 1 (if known): ____ - ____ - ____
☐ Town of Anson ☐ Town of Eagle Point Parcel Number 2 (if known): ____ - ____ - ____
☐ Town of Lafayette ☐ Village of Lake Hallie
Estimated Total Area of Site: _____ Acres Estimated Disturbed Area: _____ Acres

SECTION B: Land Conservation & Forest Management Fees: Stormwater Management – Post Construction

- | | |
|---|-----------------|
| 1. Application & Processing Fee (\$195): | \$ _____ |
| 2. <u>Commercial/Industrial</u> : Plan Review & Inspection Fee (\$3,000): | \$ _____ |
| a. Plan Amendment (\$1,495) | \$ _____ |
| 3. <u>Institutional</u> : Plan Reviews & Inspection Fee (\$1,495): | \$ _____ |
| a. Plan Amendment (\$750) | \$ _____ |
| 4. <u>Residential</u> : Plan Review & Inspection Fees: | |
| a. 1 - 3 Lots (\$1,215) | \$ _____ |
| b. Add'l Lots (\$205/each) | \$ _____ |
| TOTAL DUE TO LAND CONSERVATION & FOREST MGMT: | \$ _____ |

(Check payable to: Chippewa County Treasurer)

LCFM – Office Use
Date stamp “received” here

ADMINISTRATIVE WAIVER:

Receipt #: _____
Received by: _____

SECTION C: Submitted Information - Checklist

- | | |
|---|---|
| <input type="checkbox"/> Signed Application | <input type="checkbox"/> Peak Runoff Discharge Calculations |
| <input type="checkbox"/> Application Fee | <input type="checkbox"/> TSS Reduction Calculation |
| <input type="checkbox"/> Narrative | <input type="checkbox"/> Soil Investigation Report |
| <input type="checkbox"/> Site Plan Map | <input type="checkbox"/> Cost Estimate |
| <input type="checkbox"/> Erosion & Sediment Control Plan | <input type="checkbox"/> Quality Assurance Plan |
| <input type="checkbox"/> PE Stamped Construction Plans | <input type="checkbox"/> Long-term Maintenance Agreement |
| <input type="checkbox"/> Post-construction Stormwater Management Plan | <input type="checkbox"/> Financial Assurance |

SECTION I: Applicant Information: The person or entity holding fee title to the property or their representative. The applicant shall sign the initial permit application form in accordance with the items (a) – (e) listed below, after which the applicant may provide written authorization for others to serve as the applicant’s representative:

- (a) In the case of a corporation, by a principal executive officer of at least the level of vice-president or by the officer’s authorized representative having overall responsibility for the operation of the site for which a permit is sought;
- (b) In the case of a limited liability company, by a member or manager;
- (c) In the case of a partnership, by the general partner;
- (d) In the case of a sole proprietorship, by the proprietor, or;
- (e) For a unit of government, by a principal executive officer, ranking elected official or other duly authorized representative.

Name:			Company (if applicable):
Mailing Address:			Telephone:
City:	State:	Zip:	Email Address:

I hereby certify that I meet the definition of “Applicant” for this permit. I understand that I will become the “permit holder” once a permit is issued. I also understand by submitting this application, Chippewa County staff from the Departments of Land Conservation & Forest Management and the Department of Planning & Zoning may enter upon the project site to obtain information necessary to administer and enforce the stormwater ordinance (Section 12-37).

As the applicant, I hereby authorize _____ to serve as my representative for the purposes of this application.

Signature of Applicant: _____ **Date:** _____

SECTION II: Professional Engineer Information: The primary contact for the preparation of erosion control and stormwater management plans. All plan review comments will be addressed to this contact. For all stormwater plans and other engineering, this person must:

- (a) Be a licensed Professional Engineer in Wisconsin;
- (b) All plans submitted must be stamped with the P.E. number and signature; and;
- (c) Oversee and verify construction of all practices;

Name:			Company (if applicable):
Mailing Address:			Telephone:
City:	State:	Zip:	Email Address: