

CITY OF MANCHESTER
LAND DISTURBANCE AND
STORMWATER PROTECTION PERMIT

APPLICATION FORM

OFFICE USE ONLY
Permit No:
Application Date:
Revision Date: 10/20/2014

1. APPLICANT (Please check if Applicant is the landowner or designated Agent*)

PROJECT TITLE			
NAME		<input type="checkbox"/> LANDOWNER	<input type="checkbox"/> DESIGNATED AGENT *
* LANDOWNER SIGNATURE (GIVING DESIGNATED AGENT AUTHORITY TO OBTAIN PERMITS)			
MAILING ADDRESS			AREA CODE / PHONE NUMBER
CITY	STATE	ZIP CODE	Area Code / Fax Number

2. SITE LOCATION

STREET ADDRESS		COUNTY
SUBDIVISION NAME (IF APPLICABLE)		LOT NUMBER(S)
TAX MAP NUMBER	PARCEL NUMBER	

3. PROPOSED LAND DISTURBANCE

PROJECT TYPE:	1. <input type="checkbox"/> Residential	2. <input type="checkbox"/> Multi-Family	3. <input type="checkbox"/> Commercial	4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Other
PROJECT PURPOSE			SIZE OF DISTURBANCE (ACRES OR SQUARE FEET)		
NAME OF RECEIVING STREAM			APPROXIMATE DISTANCE TO RECEIVING STREAM (FEET)		
PROPOSED START DATE OF PROJECT			PROPOSED COMPLETION DATE OF PROJECT		

4. STORMWATER MANAGEMENT PLAN

A STORMWATER MANAGEMENT PLAN HAS BEEN PREPARED FOR THE SITE		<input type="checkbox"/> YES	<input type="checkbox"/> NO (IF NO, APPLICATION IS INCOMPLETE)
NAME OF PLAN PREPARER		PHONE # OF PLAN PREPARER	
ESTIMATED COST OF EROSION AND SEDIMENT CONTROL MEASURES		ITEMIZED ESTIMATE ATTACHED AS PART OF STORMWATER PLAN	
		<input type="checkbox"/> YES	<input type="checkbox"/> NO

5. PERFORMANCE BOND

AMOUNT REQUIRED: \$	BOND TO BE SUBMITTED AS:			
	<input type="checkbox"/> CASH	<input type="checkbox"/> CERTIFIED CHECK	<input type="checkbox"/> IRREVOCABLE LETTER OF CREDIT	<input type="checkbox"/> SURETY BOND
NAME OF SURETY COMPANY:				
ADDRESS	CITY	STATE	ZIP CODE	AREA CODE / TELEPHONE #

6. CONTRACTOR INFORMATION

NAME OF CONTRACTOR TO PERFORM LAND DISTURBANCE		ADDRESS OF CONTRACTOR		
CITY	STATE	ZIP CODE	AREA CODE / TELEPHONE NUMBER	
NAME OF INDIVIDUAL "ON SITE" RESPONSIBLE FOR EROSION CONTROL		COMPANY NAME		
CITY	STATE	ZIP CODE	TELEPHONE # (WHERE MOST LIKELY TO BE REACHED)	
HAS PERSON RESPONSIBLE FOR EROSION CONTROL ATTENDED THE STATE OF TENNESSEE "FUNDAMENTALS OF EROSION PREVENTION AND SEDIMENT CONTROL"?				
<input type="checkbox"/> YES		<input type="checkbox"/> NO		

**LAND DISTURBANCE AND STORMWATER PROTECTION PERMIT
APPLICATION FORM (CONTINUED)**

7. STATE PERMITS

IF LAND DISTURBANCE IS TO BE GREATER THAN 1 ACRE IS NOI FOR COVERAGE UNDER TENNESSEE CONSTRUCTION STORMWATER GENERAL PERMIT ATTACHED?		
<input type="checkbox"/> YES <input type="checkbox"/> NO (IF NO, APPLICATION IS INCOMPLETE)		
HAS COVERAGE UNDER THE STATE PERMIT ALREADY BEEN RECEIVED?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
IS RECEIVING STREAM LISTED ON THE STATE 303D LIST FOR SEDIMENTATION?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
ARE ANY OTHER STATE OR FEDERAL PERMITS (OTHER THAN STORMWATER) REQUIRED FOR THIS OPERATION PRIOR TO START OF CONSTRUCTION?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
IF OTHER PERMITS ARE REQUIRED PRIOR TO CONSTRUCTION; LIST TYPES AND STATUS:	TYPE OF PERMIT	STATUS OF PERMIT
	TYPE OF PERMIT	STATUS OF PERMIT
	TYPE OF PERMIT	STATUS OF PERMIT

8. ADDITIONAL INFORMATION

PROVIDE ANY ADDITIONAL INFORMATION THAT YOU BELIEVE WILL BE HELPFUL IN THE ANALYSIS OF THIS PERMIT APPLICATION
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9. CERTIFICATION

I hereby acknowledge that the information contained herein is true and correct, and I hereby agree to comply with all applicable provisions of the Codes of the City of Manchester, Tennessee.			
LANDOWNER OR DESIGNATED AGENT	PRINT NAME	SIGNATURE	DATE
CONTRACTOR	PRINT NAME	SIGNATURE	DATE

10. STORMWATER AND CODES INSPECTION BOX

Prior to beginning construction of the project, a stormwater and codes inspection box shall be located on the site. For sites of greater than one acre, the box may be the same box that houses the SWPPP. For projects of less than one acre, the box should be a waterproof box such as a mailbox and shall be labeled as "Inspections".

-----**FOR CITY USE ONLY – PLEASE DO NOT WRITE BELOW THIS LINE**-----

Permit Review Fee \$ _____	Date Paid _____
Bond Amount \$ _____	Date Received _____
Date of Pre-Construction Conference _____	
Maintenance Agreement Dated _____	
Stormwater Management Plan Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	
_____	_____
Director Approval	Approval Date