

CITY OF MANCHESTER
 SMALL RESIDENTIAL
 STORMWATER PROTECTION PERMIT

APPLICATION FORM

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

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

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 (Please attach a copy of Property Plat with Application)

PROJECT TYPE: 1. <input type="checkbox"/> New Home 2. <input type="checkbox"/> Add-On 3. <input type="checkbox"/> Garage / Shed 4. <input type="checkbox"/> Other, If Other Specify _____		
PROJECT PURPOSE _____	SIZE OF STRUCTURE (SQUARE FEET) _____	SIZE OF TOTAL LAND DISTURBANCE (SQ. FT.) _____
PROPOSED START DATE OF PROJECT _____	PROPOSED COMPLETION DATE OF PROJECT _____	
Attached Property Plat shall contain a sketch of the location of the development.		

4. STORMWATER MANAGEMENT ITEMS

Is there a stream located within 100 feet of the proposed development?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a drainage ditch located within 50 feet of the proposed development?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the development cause a significant change in the direction of stormwater flows on site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the development cause a significant change in the amount of stormwater flows on site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the development cause a partial or complete blockage of any existing watercourse?	<input type="checkbox"/> Yes <input type="checkbox"/> No

5. CERTIFICATION

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

PERMIT WILL NOT BE ISSUED UNTIL SIGNED BY BOTH LANDOWNER (OR DESIGNATED AGENT) AND CONTRACTOR. CONTRACTOR CHANGES AFTER INITIAL PERMIT ISSUANCE WILL REQUIRE THAT A NEW PERMIT APPLICATION FORM BE SUBMITTED.

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

Permit Review Fee \$ _____	Date Paid _____
Stormwater Protection Permit Approved:	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____ Director Approval	_____ Approval Date