



ACKNOWLEDGEMENT SECTION FOR
STORM WATER MANAGEMENT PERMIT
CITY OF PLATTEVILLE, WISCONSIN

Please carefully read the statements below, initial and provide the required information and signatures.

_____ By submitting an application, the applicant is authorizing the Director of Public Works to enter the site to obtain information required for the review of the Storm Water Management Plan.

_____ I have reviewed Chapter 47 of the City of Platteville Municipal Code regarding storm water management and I agree to comply with the requirements of the chapter and with all applicable federal, state, and local laws and regulations.

_____ I understand that the conditions of the permit are minimum requirements and that, upon site inspection, further measures may be required for compliance with the chapter. I understand that all required storm water management measures shall be installed and maintained as described in the permit plan. I understand that weekly inspections shall be performed and that weekly inspection reports, along with approved plans, shall be kept on-site.

_____ I understand that the issue of a Storm Water Management Permit does not relieve applicants of obtaining a Chapter 46 Erosion and Sediment Control Permit, if applicable.

_____ I agree to provide copies of the DNR permit application (if any) and a copy of the approved DNR permit (if needed) prior to Notice of Commencement of work.

_____ I agree submit a Notice of Commencement (NOC) to the Director of Public Works at least 2 business days before commencing any work in conjunction with the Storm Water Management Plan, and a Notice of Termination (NOT) within 5 business days upon completion of the storm water management practices. I will attach a certified as-built drawing of any changes that may have occurred during construction.

_____ I agree to maintain all BMPs and if necessary repair any damages to adjoining lands or drainage ways resulting from land disturbing activities at the site until final inspection approval by the City of Platteville. I agree to notify the Director of Public Works of any modifications to be approved before incorporation into the Storm Water Management Plan.

Fiscal Responsibility

_____ I agree to pay all required municipal costs and fees (47.12)

Owner's Authorized Applicant Signature

I hereby certify that as the applicant, Agent, Other Contact, I am acting as the responsible party for all work outlined in this application. I certify that the information contained in this form, schedules, and attachments are true and accurate.

Owner's Authorized Applicant Signature _____

Date _____