

Town of Spring Lake Stormwater Management Permit Application

GENERAL INFORMATION Project Name: Street Address: Directions to project (from nearest major intersection: **PERMIT INFORMATION** Specify whether the project is: □ New Project □ Modification to Existing Permit: ___ ☐ altering an existing stormwater system, including open channels Per SL Ordinance Sec.40-134 Type of Project: ☐ Less than .5 acre and less than 24% impervious with alterations to existing stormwater infrastructure ☐ Low Density – project is greater than half (.5) acre with less than 24% impervious surface ☐ High Density – project is greater than half (.5) acre with 24% or more impervious surface **CONTACT INFORMATION Applicant Information** (person, corporation, etc. who owns the project) Name: Address: State City Zip Phone **Email** Owner/Signing Official Information (person legally responsible for facility compliance) Owner/Signing Official Name: Owner/Signing Official Address: City State Zip

Email

Phone

Contact Person Information (optionally list any person who can answer questions about the project on the owners behalf – contractor, engineer, etc.)							
Name							
Address							
City				State			Zip
Phone			Email				
PROJECT INFORMATION							
Total Pro	perty Area (sqft)						
Existing Impervious Surface Area with property area (sqft)							
Proposed Impervious Surface Area within Property Area (sqft)							
Project Percent of Impervious Surface Area							
Type of stormwater BMP's proposed for this project							
	Bioretention Area	☐ Disconned Imperviou			Dry Detent Basin	ion	☐ Filter Strip/Level Spreader
	Grass Swale	☐ Infiltration Basin	n		Infiltration Trench		PermeablePavement
	Rainwater Harvesting	□ Rooftop R Managem			Sandfilter		StormwaterWetland
	Underground Detention System	□ Wet Dete Basin	ntion		Other (spec	cify)	☐ alteration of existing SCM including open channels

Complete the following information for each stormwater drainage area. If there are more than two drainage areas in the project, attach an additional sheet with the information for each area provided in the same format as below. Low density projects may omit this section.

Basin Information	SCM #	SCM #			
Receiving Stream Name					
Receiving Stream Index #					
Stream and WSWS Classification					
Total Drainage Area (sqft)					
On-Site Drainage Area (sqft)					
Off-Site Drainage Area (sqft)					
Total Impervious Area (sqft)					
Buildings/Lots (sqft)					
Impervious Pavement (sqft)					
Pervious Pavement (sqft)					
Impervious Sidewalk (sqft)					
Pervious Sidewalk (sqft)					
Other (sqft)					
Future Development (sqft)					
Existing Impervious to remain(sqft)					
Percent Impervious Area (sqft)					
Application Checklist (please make sure all required items are included at submittal) Completed Stormwater Permit Application Form Permit Application Processing Fee - \$250 (not required for low density projects under 1 acre) One (1) copy engineering plans (see attached for checklist) Property Owner Authorization Form (if applicant/signing official is not property owner) Draft Operations and Maintenance Agreement plus addendum for each SCM proposed Low Density Supplement Sheet (for Low Density Projects only)					
APPLICANT'S CERTIFICATION					
I,					
Signature					



Town of Spring Lake Stormwater Permit Supplement Property Owner Authorization Form

l,	(print or type property owner name),
certify that I own the property identified in this pe	ermit application, and thus give permission to
	(print or type name of applicant) to develop the
	e agreement or pending property sales contract has
been provided with the submittal, which indicates	
maintenance of the stormwater system.	,, ,, ,, ,, ,
As the legal property owner I acknowledge, under	rstand, and agree by my signature below, that if my
designated agent (Applicant) dissolves their comp	any and/or cancels or defaults on their lease
agreement, or pending sale, responsibility for con	npliance with the Town of Spring Lake Stormwater
Permit reverts back to me, the property owner. A	As the property owner, it is my responsibility to notify
the Town of Spring Lake immediately and submit a	a completed Name/Ownership change form within 30
days; otherwise I will be operating a stormwater t	reatment facillity without a valid permit.
, ,	, ,
Signature	 Date
Signature	Date
	a Notary Public for the State of
, County of	, do hereby certify that
	personally appeared before me this day of
	owledge the due execution of the application for a
stormwater permit. Witness my hand and official	seal,
NA. companiesion overinos.	
My commission expires:	



Town of Spring Lake Stormwater Engineer Plans Checklist

The following items are required on engineered plans submitted with stormwater permit application:

Develo	oment/Project Name					
Engineer Name and Firm						
Legend	_egend					
North A	orth Arrow					
Scale (b	ale (bar and numerical)					
Revisio	levision Number and Date					
Existing and proposed property boundaries (including right-of-way boundaries)						
Existing and proposed easements						
Location map with named streets or NCSR numbers						
Original contours						
Proposed contours						
Wetlan	Wetland Information (or note on plans that wetlands are not located on property)					
Mean High Water Table Elevation						
Existing	existing and proposed structures, paved areas, sidewalks and other impervious surface					
Location, size, length, inverts and slopes shown for all proposed stormwater pipe (can be in						
table if	necessary)					
Informa	ation for each stormwater BMP to include (as applicable):					
	Drainage Area					
	Designed rainfall depth					
	Dimensions of all basins, channels, chambers, etc.					
	Slope of channel and basin walls					
	Peak Flow Calculations					
	Storage Volume					
	Drawdown time					
	Basin elevations					
	Soils Information					
	Landscaping/Planting information					