



CITY OF CHILLICOTHE, OHIO
WATER MANAGEMENT & SEDIMENT CONTROL
WSMC – 1 PERMIT APPLICATION

Project Name: _____

Project Location: _____

Applicant: _____

(Name)

(Phone)

(Address)

Landowner: _____

(Name)

(Phone)

(Address)

Plan Prepared By: _____

(Name)

(Phone)

(Address)

Ohio P.E. Registration No.: _____

A brief description of the nature and purpose of the earth-disturbing activity: _____

A brief description of the developments area's existing and proposed stormwater conveyance system, including any allied ponds or stormwater control structures beyond the development area: _____

The name of sensitive areas as identified by _____ which receive runoff from the development area: _____

Requests for variances and justification (attach additional sheets if needed): _____

I, _____, hereby certify that I understand the provisions of the Chillicothe
(signature of applicant)

WSMC Regulations and that I accept responsibility for carrying out the WSMC Plan for the above referenced project as approved by the City Engineer.

I further grant the right-of-entry onto the project site to the designated personnel of the Chillicothe Engineering Department and the Chillicothe Utility Department for the purpose of inspecting for compliance with the Chillicothe WSMC Regulations.

Accepted by: _____ Date: _____