

**POST CONSTRUCTION
(COMPREHENSIVE STORM WATER MANAGEMENT)
APPLICATION FORM
LORAIN SOIL AND WATER CONSERVATION DISTRICT**

ALL NECESSARY INFORMATION MUST BE PROVIDED ON THIS FORM. THE REVIEW AND INSPECTION FEE SHALL BE SUBMITTED WITH THE DEVELOPMENT PLAN. PLANS SHALL NOT BE REVIEWED UNTIL THE FEE HAS BEEN PAID.

1. Owner Information	
Name _____	Phone _____
Address _____	Fax/Email _____
City _____	State _____ Zip _____
2. Agent/Engineer/Contractor/Builder Information	
Name _____	Phone _____
Contact Person _____	Phone _____
Address _____	Fax/Email _____
City _____	State _____ Zip _____
3. Subcontractors	
Firm Name _____	Phone _____
Contract Person _____	Phone _____
Address _____	Fax/Email _____
City _____	State _____ Zip _____
4. Site Information	
Site Name _____	Township _____
Site Address _____	City _____
Prior Land Uses _____	
Type of Construction Activity _____	
Project Type _____	
NPDES Permit # _____	Wetland Permit # _____ Sublot # _____ Phase # _____
Receiving Watershed _____	
5. Soil Disturbing Activity Information	
Total Project Area (acres) _____	Estimated Completion Date _____
Total Contributing Drainage Area (acres) _____	
Pre-Construction Site Conditions _____	
6. Received the Following:	
Yes / No Storm Water Management Plan	Yes / No Plan Prepared by an Engineer / Surveyor
Yes / No 2 Copies of Storm Water Mgt Plan	Yes / No Long Term Inspection & Maintenance Agreement

Yes/ No Narrative Report

Yes / No Construction Site Plan Sheets

Yes/ No Completed Storm Water Pollution (SWP3) Checklist

7. Payment Information

Make Checks Payable to Lorain County Commissioners

Date of Check _____ Check # _____ Amount \$ _____

8. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision and are to the best of my knowledge and belief, true, accurate, and complete.

Printed Name _____ Affiliation _____

I authorize the Lorain County Commissioners or its appointed agents to enter this property for the purposes of plan review, site inspection or compliance with the Lorain County Post Construction Rules for the duration of the project.

Signature _____ Date _____

9. Approval

Approved as submitted Y N By _____ Date _____

_____ Disapproved – Please Correct the following items: _____

10. Approval Stamp (Lorain SWCD)