

OFFICE USE ONLY

Barry County Planning Office
220 W State St
Hastings MI 49058
(269) 945-1290 (269) 948-4820 Fax

Soil Erosion & Sedimentation Control
Permit Application for Part 91, of Act 451
of 1994, as amended

Permit Fee \$ _____

Receipt Number _____

Date Issued _____

Expiration Date _____

Mail Back _____ **and FAX to** _____

A SITE PLAN IS REQUIRED WITH THE APPLICATION

I) Applicant (Please check if applicant is landowner or designated agent)

Name <input type="checkbox"/> Landowner <input type="checkbox"/> Designated Agent			
Address			
City	State	Zip Code	(Area Code) Telephone Number

II) Location

Section	Town North	Range West	Township	City/Village
Subdivision/Site Condominium			Lot Number(s) or Unit Number(s)	
Street Address			Property Tax ID Number	

PROJECT TYPE: Residential Multi-family Commercial Accessory Building Industrial Seawall
 Landscaping Plats or Subdivisions Land Balancing (grading or mining) County Drain Maintenance

III) Proposed Earth Change

Described Project	Soil Type	Size of Earth Change (acres or square feet)
Name of Water Course: Lake, River, Stream, Wetlands, or County Drain(s)		
Distance to Water Course	Project Start Date	Project Completion Date

IV) Soil Erosion & Sedimentation Control Plan (Refer to Rule 323.1703)

Note: _____ complete sets of plans must be attached	Estimated Cost of Erosion and Sediment Control
	Plan Preparer's Name and Area Code/Telephone Number

V) Parties Responsible for Earth Change

Name of Landowner (if not provided in Box Number 1 above)			Address		
City	State	Zip Code	(Area Code) Telephone Number		
Name of Individual "On Site" Responsible for Earth Change			Company Name		
Address	City	State	Zip Code	(Area Code) Telephone Number	

VI) Performance Deposit (If required by the permitting agency)

Amount Required \$ _____					<input type="checkbox"/> Cash	<input type="checkbox"/> Certified Check	<input type="checkbox"/> Irrevocable Letter of Credit	<input type="checkbox"/> Surety Bond
Name of Surety Company								
Address	City	State	Zip Code	(Area Code) Telephone Number				

I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Part 91, Soil Erosion & Sedimentation Control, of the Natural Resource & Environmental Protection Act, 1994 PA 451, as amended, applicable local ordinance, and the documents accompanying this application.

**DESIGNATED AGENT MUST HAVE A WRITTEN STATEMENT FROM THE LANDOWNER
GIVING AUTHORIZATION TO SECURE A PERMIT IN THE LANDOWNER'S NAME,
OR THE LANDOWNER MUST SIGN THE APPLICATION**

Landowners Signature

Date

Applicant/Designated Agent Signature

Date

OFFICE USE ONLY

Permitted Activity: _____

Specific Conditions: _____

Accepted

Unaccepted

Authorized Signature CEA

Date

