



New Castle Conservation District
2430 Old County Road
Newark, DE 19702
(302) 832-3100

APPLICATION FOR
SEDIMENT AND STORMWATER MANAGEMENT PLAN APPROVAL

PROJECT NAME: _____

PROJECT DESCRIPTION: _____

PROJECT ADDRESS: _____
STREET CITY ZIP

PROJECT LOCATION: _____
COUNTY TAX PARCEL #

PROJECT LIMIT OF DISTURBANCE (LOD) AREA IN ACRES: _____
EXPRESSED TO THE NEAREST TENTH OF AN ACRE (I.E. 4.2 ACRES)

OWNER/DEVELOPER NAME: _____

OWNER/DEVELOPER ADDRESS: _____
STREET CITY ZIP

OWNER/DEVELOPER CONTACT INFO: _____
PHONE EMAIL

CONSULTANT/ENGINEER NAME: _____

CONTACT PERSON/PROJECT ENGINEER: _____

CONSULTANT/ENGINEER ADDRESS: _____
STREET CITY ZIP

CONSULTANT/ENGINEER CONTACT INFO: _____
PHONE EMAIL

FEES

THE REVIEW FEE IS OUTLINED ON THE "DETAILED S&S PLAN FEE REVIEW SCHEDULE". MAKE CHECKS PAYABLE TO NEW CASTLE CONSERVATION DISTRICT.

Submittal/ Approval Information (For Office Use Only)

- | | |
|--|-----------------------------|
| <input type="checkbox"/> Step 1: Stormwater Assessment Study (SAS)/ Stormwater Assessment Report (SAR) | _____ (reviewer's initials) |
| <input type="checkbox"/> Step 2: Preliminary Sediment & Stormwater Management Plan Review Checklist | _____ (reviewer's initials) |
| <input type="checkbox"/> Step 3: Sediment & Stormwater Management Plan Review Checklist | _____ (reviewer's initials) |
| <input type="checkbox"/> Step 2/3: Combined Sediment & Stormwater Management Plan Review Checklist | _____ (reviewer's initials) |
| <input type="checkbox"/> Sediment and Stormwater Management Plans (Approval Set) | _____ (reviewer's initials) |
| <input type="checkbox"/> NPDES Notice of Intent (NOI) Application (# _____) | |

Tracking #: _____ Fee Paid: \$ _____
Amount Check #

Approved By: _____ Approval Date: _____

Title: _____ Expiration Date: _____

OWNER/DEVELOPER CERTIFICATION

"I/We certify that the information on this form and the attached plans is true and accurate to the best of my/our knowledge."

"I/We understand that New Castle Conservation District may request information in addition to that set forth herein as may be deemed appropriate in considering this application."

"I/We will abide by the condition of this approval as issued."

"I/We certify that all land clearing, construction and development shall be done pursuant to the approved attached plans and that responsible personnel (i.e. Blue Card Holder) involved in the land disturbance will have a Certification of Training prior to initiation of the project, at a DNREC sponsored or approved training course for the control of erosion and sediment during construction. In addition, I/We grant the DNREC Sediment and Stormwater Program and New Castle Conservation District the right to conduct on-site reviews, and I/We understand my/our responsibilities under the NPDES Construction General Permit, associated with this site."

Owner/Developer Signature

Date

Owner/Developer Name and Title (Printed or Typed)

DESIGNER CERTIFICATION

"I hereby certify that this plan has been prepared under my supervision and to the best of my knowledge complies with the applicable state and local regulations and ordinances."

Designer Signature

Date

Delaware Reg. No. (if Applicable)

Designer Name and Title (Printed or Typed)

Type (P.E., P.L.S., or R.L.A.)

AGENT AUTHORIZATION*

(*If this authorization form is completed with the application, all future correspondence may be signed by the duly authorized agent.)

I, _____ hereby designate and authorize the following identified agent to act on my behalf in the processing of this application and to furnish any information that is requested.

AGENT NAME: _____

AGENT ADDRESS: _____
STREET CITY ZIP

AGENT CONTACT INFO: _____
PHONE EMAIL

Owner/Developer Signature

Date

Agent Signature

Date