



Stormwater Clearance Application for Technical Review of a Construction Site Stormwater Pollution Prevention Plan (SWPPP) - Greater Elkhart County MS4



Revised 07/22

Project Name: _____

Project Location Description:
(e.g., NW corner of CR 11 and CR 28)

Project Address (Required): _____

Municipal Jurisdiction: Bristol Elkhart Goshen Middlebury Nappanee Elkhart County

Latitude & Longitude (Submit in Decimals): _____ **Hydrologic Unit Code:** _____

Civil Township: _____ **Quarter:** _____ **Section:** _____ **Township:** _____ **Range:** _____

Project Site Owner (Company): _____

Contact Person: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **email:** _____

Plan Preparer Name: _____

Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **email:** _____

On-site Erosion Control Supervisor (Required Field): _____

Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

(A trained individual responsible for self-inspection and record-keeping as defined by the Construction Stormwater General Permit (INRA00000) Section 3.0(c) and Appendix B(66))

Phone: _____ **email:** _____

Name of receiving water: _____

(If stormwater is retained on site, name the nearest possible receiving water.)

Total Project Acreage: _____ **Acres** **Acreage to be Disturbed:** _____ **Acres**

Total Impervious Surface for Completed Project: _____

(As defined by the Construction Stormwater General Permit (INRA00000) Section 5.2(a)(6)(F) including structures, roads, parking lots, and other similar improvements)

Subject to penalty of law, the undersigned represents and certifies that the information and facts stated on this form are true, accurate, and complete.

Printed Name: _____ **Title:** _____

Signature of Project Site Owner*: _____

Date: _____

For Office Staff Only

Filing Fee: \$ _____ **PermiTrack:** _____

Date Received: _____ **Sent to IDEM:** _____ **Date Approved:** _____

Make Checks Payable to: Elkhart County Treasurer

SUBMIT Application and Fee to the SWCD Office - call (574) 523-2030 for more information.