

**Part 91, Soil Erosion and Sedimentation Control Plan****Minimum Requirements**

Project: _____

| Rule 1703 Requirement | Included in Plan?* | Comments |
|---|--|-----------------|
| Map with scale: 1" = 200' or less, or indication of exact distances between noted features on site plan | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Legal description of property (town, range, section, quarter-quarter section) | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Proximity of any proposed earth change to lakes and/or streams | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Predominant land features | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Slope description or contour intervals | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Soils survey or written description of the soil types of the proposed exposed land area | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Description and location of the physical limits of each proposed earth change | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Description and location of all existing and proposed on-site drainage and dewatering facilities | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Timing and sequence of each proposed earth change | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Location and description for installing and removing all temporary SESC measures | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Description and location of all proposed permanent SESC measures | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Maintenance program for all permanent SESC measures and designation of person responsible for maintenance | Yes <input type="checkbox"/> No <input type="checkbox"/> | |

If No is checked above, the plan must be revised to include the missing element prior to submittal/approval.*Other Comments:**

PERMIT APPLICATION

For Part 91 SOIL EROSION & SEDIMENTATION CONTROL

OFFICE USE ONLY

DATE _____ PERMIT # _____
AMOUNT _____ RECEIPT # _____

APPLICANT _____ Owner ____ Contractor ____ Other ____
ADDRESS _____
CITY, STATE, ZIP _____ PHONE _____

LANDOWNER _____
ADDRESS _____
CITY, STATE, ZIP _____ PHONE _____

RESPONSIBLE FOR EARTH CHANGE
NAME _____
ADDRESS _____
CITY, STATE, ZIP _____ PHONE _____

PROJECT TYPE _____ SIZE OF TOTAL EXCAVATION _____
(new residence, septic system, driveway, etc.) (acres or square feet)
DISTANCE TO WATER _____ ft NAME OF NEAREST WATER _____
TOWNSHIP _____ Sec # _____ Property # (Tax ID #) _____
PROJECT ADDRESS _____ SUBDIVISION _____ LOT # _____
PROJECT **START** DATE _____ PROJECT **COMPLETION** DATE _____

NOTE: This office has 30 days to inspect and approve/deny an application for permit from the date the application is received in our office. No work can be done until the inspection is received.

RESPONSIBLE PARTY FOR FINAL STABILIZATION
NAME _____ PHONE _____

(The establishment of vegetation or the proper placement, grading, or covering of soil to ensure its resistance to soil erosion, sliding, or other earth movement) *NOTE: All disturbed soils need to be stabilized within 5 days of project completion in accordance with Rule 1709, subsection (5) of Part 91 of NREPA Act 451, of 1994 as amended.

*Permittee agrees to indemnify the County of Clare and all of its departments, agencies, boards, commissions, officers, employees, and agents from any and all liability arising under or in any manner related to the issuance of the Permit or the privileges granted under this Permit.

*The property owner, contractor, and any agent in obtaining this Permit are held responsible to insure the project is constructed in accordance with all drawings and specifications contained in this Permit.

*The permittee hereby acknowledges and accepts sole liability for any injury to persons or property which may result from the activities authorized by issuance of this permit.

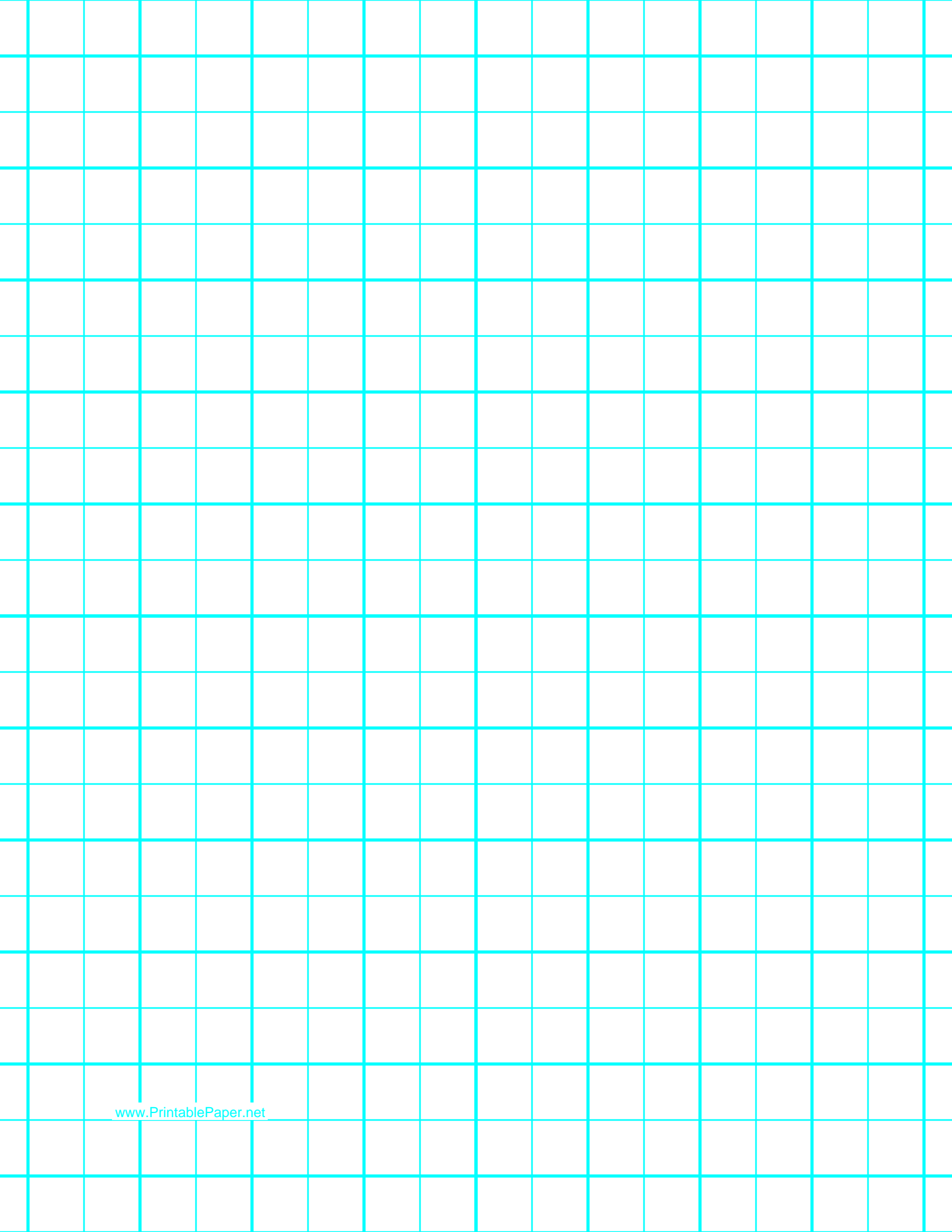
I understand that payment of the application fee does not guarantee a permit.

In accordance with Part 91 of NREPA Act 451, of 1994 and its corresponding general rules, the undersigned hereby submits this application and site plan which is to be followed in detail. I hereby authorize the Soil Erosion Control Agent to inspect this project site.

SIGN

Landowner/Designated Agent _____ Date _____

Clare Conservation District, 225 W. Main St., P.O. Box 356, Harrison MI 48625, 989-539-6401/ fax 989-539-2182





CLARE CONSERVATION DISTRICT

Offices of Clare County Soil Erosion,
Michigan Forestry Assistance Program,
Clare County Gypsy Moth Suppression Program

225 WEST MAIN STREET
P.O. BOX 356
HARRISON, MI 48625-0356

Telephone: (989) 539-6401
Fax: (989) 539-2182
Web Site: www.clarecd.org

Board of Directors:

- Larry Gross, *Chairman*
- John Hood, *Vice-Chairman*
- Scott Peterson, *Member*
- John Kennedy, *Member*
- Roberta Schunk, *Treasurer*

Effective immediately, Part 91, Soil Erosion and Sedimentation Control, of the NREPA, 1994 PA 451, as amended, requires each designated agent applying for a Soil Erosion permit on behalf of another person to include a statement authorizing him/her to secure the permit. Please have the landowner complete this Letter of Authorization to be submitted with the application.

District Staff:

- Administrator –**
Melissa Townsend
- Soil Erosion Agent/
Gypsy Moth Suppression
Coordinator –**
Renee Davis
- Forester –**
Nia Becker

Letter of Authorization

_____ is authorized to secure a Soil Erosion

Permit in my name for a project requiring said permit at:

_____ (address)

NRCS Staff:

- District Conservationist –**
David Lehnert
- Field Technician –**
DeAnn Denton

_____ (landowner signature)

_____ (date)