



STORMWATER MANAGEMENT PERMIT APPLICATION

Application Date: _____

Site Address: _____

Project Description: _____

Proposed Activity:

☐ New Building
☐ Subdivision

☐ Building Addition
☐ Redevelopment

☐ New Paving
☐ Grading/Repaving

Area of Parcel: _____ square feet

Disturbed Area: _____ square feet

Impervious Area: _____ square feet

Total Site Impervious _____ square feet

Applicant Name: _____

Phone: _____

Address: _____

Email: _____

Site Owner Name: _____

Phone: _____

Address: _____

Email: _____

Engineer: _____

Phone: _____

Email: _____

Contractor: _____

Phone: _____

Email: _____

The undersigned agrees to conduct the above described activities in accordance with the approved Stormwater management Plan, and in strict compliance with all the provisions of the City of Cedarburg Ordinance and the Code of the State of Wisconsin, and to grant permission for reasonable inspections as a condition of this permit.

OWNERS STATEMENT: I request that plans be reviewed for compliance with the City of Cedarburg Municipal Code Chapter 14-2 and applicable State Codes. I recognize that I am responsible for compliance with all Code requirements and any conditions of plan approval.

Signature of Owner

Signature of Applicant

City of Cedarburg Approval Signature

Office Use Only

Permit No. _____

Permit Fee \$ _____

Date Issued _____

Tax Key No. _____