

Site Grading and Stormwater Management Plan Drainage Approval Lake County Stormwater Management Department

ALL NECESSARY INFORMATION MUST BE PROVIDED ON THIS FORM. THE REVIEW AND INSPECTION FEE SHALL BE SUBMITTED WITH THE DEVELOPMENT PLAN. PLANS SHALL NOT BE APPROVED UNTIL THE FEE HAS BEEN PAID

1. Owner Information	
Name _____	Phone: _____
Address _____	Fax: _____
City _____ State _____	Zip _____
2. Agent/Contractor/Homebuilder Information	
Name _____	Phone: _____
Contact Person: _____	Phone: _____
Address: _____	Fax: _____
City _____ State _____	Zip _____
3. Site Location Information	
Facility/Site Name: _____	Township: _____
Address _____	Proj Type: _____
Zoning Permit#: _____	Sublot#: _____ (subdivision, commercial, single lot, etc.)
City _____ State _____	Zip _____
4. Soil Disturbing Activity Information	
Total Project Area (acres): _____	Proposed Start Date (mo/day/yr): _____
Disturbed Area (acres): _____	Estimated Completion Date (mo/day/yr): _____
Drainage Area (acres): _____	
5. Payment Information	Make Checks Payable to Lake County Engineer
Date of Check: _____	Check#: _____ Amount: _____
6. Certification	
Do you want the approved site plan(check one): _____ Call for pick up _____ Forward to Building _____	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision and are to the best of my knowledge and belief, true, accurate, and complete.	
Printed Name: _____	Affiliation: _____
<i>I authorize the Lake County Commissioners or its appointed agents to enter this property for the purposes of plan review, site inspection or compliance with the Lake County Stormwater Management Rules and Regulations for the duration of the project.</i>	
Signature: _____	Date: _____
7. Approval Approved as submitted: Y N By: _____ Date: _____	
_____ Approved with the following stipulations: _____	
_____ Disapproved - please correct the following items: _____	