DUPAGE COUNTY STORMWATER MANAGEMENT CERTIFICATION APPLICATION

1. COMMUNITY AND STATUS	2. DATE APP. RECEIVED BY COMMUNITY	3. STORMWATER APPLICATION/PERMIT NO. *(to be assigned by community)*	4. DEC Tracking No.
_____Non _____Partial _____Complete		____ ____-____ ____-____ ____ ____ ____	

5. ***(Community use only)***

6. NAME, ADDRESS AND TITLE OF APPLICANT
Attn:

Email: _____

Telephone No. during business hrs:_____

7. NAME AND ADDRESS OF OWNER
Attn:

Email: _____

Telephone No. during business hrs: _____

8. **CHECK ALL OF THE FOLLOWING CONDITIONS WHICH APPLY:**

☐ Flood Plain ☐ Wetland ☐ Soil Erosion & Sediment Control
☐ Stormwater Detention ☐ Wetland Buffer
☐ Best Management Practices ☐ Riparian Buffer

9. DESCRIPTION OF PROPOSED DEVELOPMENT:

10. LOCATION OF DEVELOPMENT

_____
Street Address

_____
Municipality

_____
Watershed Planning Area & Tributary

11. LEGAL DESCRIPTION

_____ _____ _____
1/4 Section Township Range

PP No.____ ____ - ____ ____ - ____ ____ ____ - ____ ____ ____

PP No.____ ____ - ____ ____ - ____ ____ ____ - ____ ____ ____

12. INTENTIONAL MISREPRESENTATION UNDER PENALTY OF PERJURY: I declare that I have examined and/or made this application and rider and it is true and correct to the best of my knowledge and belief. I realize that the information that I have affirmed hereon forms a basis for the issuance of the stormwater management certification(s) herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any provision of any applicable ordinance or to excuse the owner or his successors in title from complying therewith. The Owner and Applicant each understand and agree to construct said improvement in compliance with all provisions of the applicable ordinances.

_____ _____ _____ _____
Signature of Applicant Date Signature of Owner Date

_____ _____
Print Applicant Name and Title Print Owner Name and Title

13. FOIA: The Applicant acknowledges that all stormwater submittals (including architects' drawings, engineers' technical submissions and other construction-related technical documents containing stormwater management information) submitted with this application may be made available for inspection or copying by the County, notwithstanding 5 ILCS 140/7(1)(k), upon the written request for such materials. Such productions will be restricted to the following parties: i) the Applicant ii) any subsequent owner of the subject property; or iii) any governmental unit having planning or drainage jurisdiction within 1 and 1/2 mile of the subject property.

_____ _____ _____ _____
Signature of Applicant Date Signature of Owner Date

_____ _____
Print Applicant Name and Title Print Owner Name and Title

(Office use only)

14. STORMWATER REVIEW FEE (***separate checks)*** Amount Received By/Title

Community _____ _____

DuPage County Stormwater Management _____ _____

15. PROBABLE COST	Amount	**16. SECURITIES**	Amount
Estimate of probable cost of construction of stormwater facilities	_____	Development Security	_____
Estimate of a natural area, wetland and buffer mitigation area	_____	Natural Area Security	_____
Estimate of probable cost of implementation and maintenance of soil erosion & sediment control	_____	Soil Erosion & Sediment Control Security	_____
		Total Security	_____

17. FINAL APPROVALS Date Approved By/Title Seal/Stamp

Community Certification _____ _____

County Authorization _____ _____

******Certifications expire December 31st of the third year**

from the date of Certification or Authorization, whichever is earlier.

18. SPECIAL CONDITIONS

(10/14) ____-Community Copy ____-DuPage DEC Copy ____-Applicant Permit Copy ____-Application Copy

RIDER TO DUPAGE COUNTY STORMWATER MANAGEMENT CERTIFICATION

THIS FORM MUST ACCOMPANY EVERY DUPAGE COUNTY STORMWATER MANAGEMENT CERTIFICATION APPLICATION

STORMWATER APPLICATION/PERMIT No. __ __ - __ __ - __ __ __ __ DEC TRACKING No. _____

1. CHECK LIST: *(Community Sign-off with Initials)*

_____ A Professional Engineer under the employment of the Applicant provided a statement within the submittal rendering an opinion that the development meets the minimum criteria for stormwater management in accordance with the Ordinance. (15-36)

_____ General Provisions – Building Protection: flood proofing measures certified by a professional engineer are included in this submittal. (15-28.A)

_____ The Applicant certifies that on site infiltration (PCBMP) area complies with the Ordinance (15-63.B.2).

_____ The developer shall grant (at the time of permitting), to the County or waiver community, a temporary easement authorizing access to the development site to comply with Article VI of the Ordinance.

2. STORMWATER MANAGEMENT AFFIDAVITS and STATEMENTS *(Check and Sign all that apply)*

_____ **LETTER OF PERMISSION**:
The undersigned affirm that all calculations are in accordance with standard engineering practice and have been checked for accuracy of calculation and are in compliance with the requirements of the Ordinance (15-31).

_____	_____	_____
Signature of Applicant	Date	Print Applicant Name and Title
_____	_____	_____
Signature of Design Professional	Date	Print Design Professional Name and Title

_____ **DESIGN REQUIREMENTS:**
I certify that I am aware of the design requirements of the **IEPA NPDES ILR10** permit and I certify that the plan meets those requirements. (15-50.A)

_____	_____	_____
Signature of Applicant	Date	Print Applicant Name and Title

3. STATEMENT OF OPINION: (15-47.A.5)

☐ I acknowledge the presence of flood plain. ☐ I acknowledge the presence of wetlands. ☐ I acknowledge the presence of buffers.
☐ I deny the presence of flood plain. ☐ I deny the presence of wetlands. ☐ I deny the presence of buffers.

_____	_____	_____
Signature(s) of Qualified Professional(s)	Date	Print Qualified Professional(s) Name(s) and Title(s)
_____	_____	_____
Signature(s) of Qualified Professional(s)	Date	Print Qualified Professional(s) Name(s) and Title(s)
_____	_____	_____
Signature(s) of Qualified Professional(s)	Date	Print Qualified Professional(s) Name(s) and Title(s)

☐ 4. SOIL EROSION and SEDIMENT CONTROL REQUIREMENTS:

_____ Developments with land disturbance greater than one (1) acre: I certify that the site complies with the IEPA NPDES ILR 10 permit. (15-59.W)

_____	_____	_____
Signature of Applicant	Date	Print Applicant Name and Title

_____ Developments with land disturbance less than one (1) acre that are not part of a larger common plan: I certify that the development meets the soil erosion and sediment control design criteria found in Article VII. (15-50.B)

_____	_____	_____
Signature of Qualified Designer	Date	Print Qualified Designer Name and Title

☐ 5. WETLAND BOUNDARY:

_____ I acknowledge the wetland boundary and Ordinary High Water Mark have been verified on _____. (15-48.C.2)

_____	_____	_____
Signature of Applicant	Date	Print Applicant Name and Title

6. SPECIAL CONDITIONS: (THIS SECTION TO BE COMPLETED AT PERMIT ISSUANCE)*(Indicate All That Apply)*

_____ I acknowledge that a record drawing signed by either a Professional Engineer or a Professional Land Surveyor depicting the as-constructed size, rim and inverts elevations of pipes, stormwater structures and culverts, and contours and flood storage volumes of all required basins of the major and minor stormwater systems will be submitted for review and approval upon completion of the stormwater facilities. (15-47.B)

_____	_____	_____
Signature of Owner	Date	Print Owner Name and Title

_____ An informational note acknowledging the presence of on-site wetlands, buffers, flood plains, and PCBMPs with drainage area one (1) acre or greater has been recorded against the title to alert all future owners and shall reference the Stormwater Management Certification number. (15-47.C)

_____	_____	_____
Signature of Owner	Date	Print Owner Name and Title

_____ I have read and acknowledge all other general conditions and special conditions if applicable, on the authorization/certification letter dated _____.

_____	_____	_____
Signature of Owner	Date	Print Owner Name and Title