

# CITY OF IRONDALE APPLICATION FOR LAND DISTURBING ACTIVITY

IF APPLICANT HAS A NPDES CONSTRUCTION PERMIT ISSUED BY ADEM A COPY OF THE PERMIT AND A COPY OF THE APPROVED BMP PLAN IS REQUIRED FOR ISSUANCE OF THIS PERMIT

<b>DATE:</b>	<b>FEE AMOUNT:</b>	<b>JOB COST:</b>	<b>PERMIT #:</b>
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### APPLICANT INFORMATION

Name:	Current Address:		
City:	State:	ZIP Code:	
Phone Number:	Fax Number:	Email Address:	

### PROPERTY OWNER INFORMATION

Name:	Current Address:		
City:	State:	ZIP Code:	
Phone Number:	Fax Number:	Email Address:	

### PROPERTY INFORMATION

Address:		
City:	State:	ZIP Code:
Legal Description:		

### CONTRACTOR INFORMATION

Name:	Current Address:		
City:	State:	ZIP Code:	
Phone Number:	Fax Number:	Email Address:	

### EROSION AND SEDIMENTATION CONTROL PLAN PREPARED BY (NOT NECESSARY FOR SINGLE FAMILY CONSTRUCTION PERMIT)

Name:	Current Address:		
City:	State:	ZIP Code:	
Phone Number:	Fax Number:	Email Address:	

### CERTIFICATION

Type of Certification: QCP / QCI / ESC Workshop / None	Type of QCP: CPESC / P.E. / L.A. / P.L.S. / R.A. / R.G. / R.F. / R.E.M. (Must meet or exceed all requirements as defined in Article I Definitions of the Storm Water Management Erosion And Sedimentation Control Ordinance under Qualified Credentialed Professional)		
Certification #	Certification Expiration Date:		

### SURETY (IF CERTIFICATION REQUIREMENT NOT MET)

Surety Type:	Surety Amount:	Surety Expiration Date:
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### TYPE OF CONSTRUCTION

Single Family / Commercial	New Construction / Demolition / Repair or Replace / Excavation (Fill or Cut) / Utility Installation / Other:
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### SIGNATURES

**I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision and that I have personally examined, and I am familiar with, the information in this document and such attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and civil penalty.**

Signature of Applicant:	Date:
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**THIS DOCUMENT BECOMES THE LAND DISTURBANCE ACTIVITY PERMIT WHEN SIGNED FOR OR BY THE ASSIGNED CITY OFFICIAL OF THE CITY OF IRONDALE**

For:	By:	Date:
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**NO MUD OR SILT WILL BE PERMITTED TO RUN ONTO ADJACENT PROPERTIES**