

# ISABELLA COUNTY

## SOIL EROSION & SEDIMENTATION CONTROL APPLICATION

(RETURN COMPLETED APPLICATION TO:)  
ISABELLA COUNTY  
OFFICE OF DRAIN COMMISSIONER  
200 N. MAIN ST.  
MT. PLEASANT, MI 48858  
FAX: (989)779-8785

APPLICATIONS WILL NOT BE ACCEPTED UNLESS ALL THE FOLLOWING ARE PROVIDED AT THE TIME OF APPLICATION:

### \*Instructions for filling out the Application for a Soil Erosion Permit

- #1 Applicant**  
\* Mailing address and phone number
- #2 Location**  
\* Fill in all blanks (contact our office if you need help)  
See property tax billing for tax I.D. number. If property has been split within the last year, a copy of the split record is required from the Township Supervisor or Assessor. If property was purchased within the last year, a copy of the new deed is required.
- #3 Proposed earth change**  
\* Describe project: New House, addition, garage, etc...  
\* Size of Earth change. Be sure to fill in area or length using appropriate measurements  
\* Name of nearest lake, stream, or drain, and distance (feet) to it  
\* Date project is to start and appx. date to finish
- #4 Soil erosion and sedimentation control plan**  
\* Required site plan (see attached sheet for drawing, for residential and small projects)  
**Includes Items:**  
1) scaled map & north arrow    5) predominant land features    9) timing and sequence  
2) site location sketch    6) slope information    10) temporary SESC measures (location & type)  
3) proximity to lake or stream    7) soils information    11) permanent SESC measures (location & type)  
4) limits of earth change    8) drainage facilities    12) maintenance program for SESC measures
- #5 Parties responsible for earth change**  
\* Usually this is the property owner or their Designated Agent.
- #6 Performance deposit**  
\* May be required for larger projects including subdivisions, commercial or industrial projects. Bonds shall be executed by the permitted and a corporate surety with authority to do business in Michigan as a surety.

#### PLEASE NOTE-We also need:

1. Landowner Signature - We must have the property owner's signature on the application or a letter from the property owner giving the Designated Agent permission to act in his/her behalf regarding the Soil Erosion Permit.
2. **Project Site Diagram** must accompany application, and directions to project site from nearest main road.

For more information on filling out this application or the permit fee, please contact the Isabella County Drain Commissioner's Office - (989) 772-0911 ext. 247

**ISABELLA COUNTY PERMIT APPLICATION**  
for Part 91 as amended  
**SOIL EROSION AND**  
**SEDIMENTATION CONTROL**

<b>Permit Number</b>
<b>Date Issued</b>
<b>Expiration Date</b>
<b>Disapproved</b>
<b>Modification Requested</b>
<b>Fees Paid:</b> <input type="checkbox"/> App. <input type="checkbox"/> Permit
Check <input type="checkbox"/> No. _____ <input type="checkbox"/> Cash

**1. APPLICANT (Please check if applicant is the landowner or designated agent\*)**Name \_\_\_\_\_  Landowner  Designated Agent

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code/Telephone Number \_\_\_\_\_

**2. LOCATION**

Section \_\_\_\_\_ Township T. \_\_\_\_\_ N. Range R. \_\_\_\_\_ W. Township \_\_\_\_\_ City/Village \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot No. \_\_\_\_\_ Tax ID Number \_\_\_\_\_ Street Address \_\_\_\_\_

**3. PROPOSED EARTH CHANGE** Project Type:  Small Add/Garage  Seawalls  Service Facilities  IndustrialDescribe Project:  Residential  Subdivision  Commercial  \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Size of Earth Change:****Area:** Acres \_\_\_\_\_  
 Sq. Ft. \_\_\_\_\_**Length:** Miles \_\_\_\_\_  
 Feet \_\_\_\_\_

Name of and Distance (feet) to Nearest Lake, Stream or Drain \_\_\_\_\_ Date Project to Start \_\_\_\_\_ Date Project Completed \_\_\_\_\_

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**4. SOIL EROSION AND SEDIMENTATION CONTROL PLAN (Refer to Rule 323.1703)**

Two complete sets of plans must be attached. Estimated Cost of Erosion and Sediment control \$ \_\_\_\_\_

Plan Preparer's Name and Telephone Number \_\_\_\_\_ ( ) \_\_\_\_\_

**5. PARTIES RESPONSIBLE FOR EARTH CHANGE****(a.)** Name of Landowner (if not provided in Box No. 1 above) \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Area Code/Telephone Number \_\_\_\_\_

**(b.)** Name of Individual "On Site" Responsible for Earth Change \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Area Code/Telephone Number \_\_\_\_\_

**6. PERFORMANCE DEPOSIT (If required by the permitting agency) OFFICE USE ONLY**Amount Required \$ \_\_\_\_\_  Cash  Certified Check  Irrevocable letter of Credit  Surety Bond

**I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Part 91, Soil Erosion and Sedimentation control, of the Natural Resource and Environmental Protection Act, 1994 PA 451, as amended, applicable local ordinances, and the documents accompanying this application. I hereby authorize the Soil Erosion Control Agent to inspect this project site for conformance. I understand that payment of the fee does not guarantee a permit will be issued.**

Landowner's Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Designated Agent's Signature\* \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

\*Designated agent must have a written statement from landowner authorizing him/her to secure a permit in the landowner's name. No work can be done until permit is received. Return completed application and plans to: **Office of the Drain Commissioner**