



STORMWATER PERMIT APPLICATION

Permit #: _____

Location of Improvement

Street Address

Projected Start Date

Project Contact

Project Owner Name

Project Owner Address

City

State

Zip

Primary Phone

E-mail

Engineer/Surveyor

Engineer/Surveyor Name

Engineer/Surveyor Address

City

State

Zip

Primary Phone

E-mail

Builder/Contractor

Builder/Contractor Name

Builder/Contractor Address

City

State

Zip

Primary Phone

E-mail

Type of Improvement

Type of Structure	Pond or Swale	Use of Proposed Structure
<input type="checkbox"/> Principle	<input type="checkbox"/> New	<input type="checkbox"/> Single Family Residential
<input type="checkbox"/> Accessory	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Two-Family Residential
<input type="checkbox"/> Garage	<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Multi-Family Residential
<input type="checkbox"/> Storage	_____	<input type="checkbox"/> Commercial
<input type="checkbox"/> Parking (Concrete/Asphalt)		<input type="checkbox"/> Industrial
<input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> Other (specify) _____
_____		_____

Characteristics of the Structure

Total Area (sq. ft.)	Total Impervious Area (sq. ft.)	Total Disturbed Area (sq. ft.)
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Permits & Approvals

<input type="checkbox"/>	Indiana State Release of Plans	<input type="checkbox"/>	Sanitary Tap Fee
<input type="checkbox"/>	IDEM	<input type="checkbox"/>	Zoning Variance
<input type="checkbox"/>	IDNR	<input type="checkbox"/>	Zoning Amendment

Floodplain Data

Elevation of the 100-year flood (ft)	Lowest floor elevation (ft)
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AFFIDAVIT OF APPLICATION

1. Work may not be started before a permit has been issued and posted, or available on site.
2. The permit will be considered VOID if work has not begun within 60 days of issuance.
3. The permit must be posted on site in a conspicuous location, visible from the street, and must remain in place during the entire period of construction.
4. If any changes or deviations are made from the original application, the Planning Department must be notified immediately.
5. The undersigned is responsible for erosion and sediment control plans.
6. The undersigned agrees to comply with the Construction Stormwater General Permit (CSGP) for any land disturbing activities.
7. The undersigned owner or agent understands that the approval of this application does not constitute a privilege to violate any applicable government ordinances, codes, or laws. In addition, any omission or misrepresentation of fact, with or without intention of the undersigned, or any alteration or change from revocation of any permit issued which was based on the approval of this application.
8. The Town of Whiteland does not have the authority to enforce subdivision covenants or local homeowners' association covenants.

Applicant's Name (Printed)

Applicant's Signature

*Date***OFFICE USE ONLY**

Permit Fee	Date Received	
Receipt Number	Date Issued	
Permit Number	Date Denied	
Signed	Title	Date
Comments		