



FOR OFFICE USE ONLY	
Date	_____
Permit #	_____
Needs Approval	_____
IP	_____
Fee'd	_____

APPLICATION FOR EROSION CONTROL PERMIT (RESIDENTIAL)
Form #CDI132 (rev 12/15)

IMPORTANT: After erosion control measures are installed according to the approved plan, you are required to call the Soil Erosion Specialist at 262.653.4247 to schedule an inspection.

Project Address _____	Lot # (for new buildings) _____
Property Owner _____	Contractor _____
Mailing Address _____	Mailing Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone (_____) _____	Phone(_____) _____
Project Contact Person _____	E-mail Address _____
Total Area to Be Disturbed (square feet) _____	
Description of Land Disturbing Activity: Excavating: Cubic Yards _____ OR Filling: Cubic Yards _____	
Trenching: Linear Feet _____ Grading or Site Stripping: Square Feet _____	
Anticipated Completion Date: _____	

DESCRIPTION	FEE	QUANTITY
PLAN REVIEW - Residential	\$ 100.00	_____
BASE FEE	\$ 200.00	_____
DOUBLE PERMIT FEE IF PERMIT IS ISSUED AFTER WORK HAS STARTED		_____



WETLANDS NOTICE TO PERMIT APPLICANTS

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

ADDITIONAL RESPONSIBILITIES FOR OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRE(S) OF SOIL

I understand that this project is subject to Ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all of the permit information herein is accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

Property Owner's Signature _____ Date _____

Please Print Name _____