TOWN of SUGAR CREEK

N6641 County Rd. H • P.O. Box 287 • Eiknorn, Wt 53121 Pnone: (262) 742-3383 • Fax: (262) 742-4476

Erosion Control Permit

	Date	APPLICATION	Fee
P	roject Location:		Permit #
A	pplicant Name:		Tax Key #
Αţ	oplicant Address:		Phone: ()
Contractor:		F	Phone: ()
All erosion control plans for sites shall show the following:			
1.	 Locations of existing and proposed dwellings with respect to the property lines and the limits of land disturbance activities. 		
2.	. Direction of slope before and after land disturbance, and the size of the upslope drainage area.		
3.	. Locations of all temporary best management practices to control erosion from the site.		
4.	Indicate existing ground cover on site (i.e. grass, trees, exposed soil, etc.).		
5.	Construction timeline (provide est	imated dates Preliminary	Backfilling
	Excavation	Final Gradin	ng
6.	6. Provide narrative of re-vegetation plan (i.e. seeding mixture, sod, timeline to be completed)		
Conditions of Approval:			
1.	1. Erosion and sediment control measures shall be installed prior to any land disturbing activities.		
· 2.	Inspect the erosion and sediment control practices after each rain of $\%$ inches or more and at least once each week and make needed repairs.		
	No silt fence will be required for this site, but if runoff become a problem, it will be required.		
	Monitor and maintain silt fence on site until the site is stabilized.		
	Install a gravel access of 3 inch stone to a depth of six inches, seven feet wide and at least 50 feet long. All gravel and soil piles must be kept at least 15 feet from the road area. Any sediment that leaves the site and enters the roadway must be cleaned up by the end of each work day. All practices must be maintained until the site is stabilized with seed and mulch or sod.		
Please attach survey map or site sketch detailing erosion control provisions.			
Ruildin	g inspector	Annligant	Date .