

**CHARLEVOIX COUNTY**  
**DEPT OF BUILDING SAFETY**  
**301 STATE ST. STE #5**  
**CHARLEVOIX, MI 49720**  
**PHONE (231) 547-7236**  
**FAX (231) 547-7250**  
**1-800-548-9157 Ext. 4**

**PERMIT APPLICATION**  
**for Part 91**  
**SOIL EROSION AND**  
**SEDIMENTATION CONTROL**  
**and/or STORMWATER**  
[www.charlevoixcounty.org](http://www.charlevoixcounty.org)

OFFICE USE ONLY	
Permit Number	
Date Received	
Cert Permit Issued	
Violation	
Call	Mail

**1. APPLICANT (Please check if applicant is the landowner or designated agent)**

Name <input type="checkbox"/> Landowner <input type="checkbox"/> Designated Agent			
Address			
City	State	Zip Code	Area Code/Telephone Number ( )

**2. LOCATION**

**Call 1-800-548-9157 ext. #1 for Complete Tax ID Information**

Section	Town	Range	Lot Nos.	Township	Tax ID #
	N	W			
City/Village		County <b>CHARLEVOIX</b>		Street Address	

**3. PROPOSED EARTH CHANGE**

Describe Project			Size of Earth Change (acres or square feet)
Name of and Distance to Nearest Lake, Stream or Drain	Date Project to Start	Date Project to be Completed	

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

<b>NOTE (1) SET OF COMPLETE PLANS MUST BE ATTACHED</b>	Estimated Cost of Erosion and Sediment Control	
	Plan Preparer's Name	Area Code/Telephone Number ( )

**5. PARTIES RESPONSIBLE FOR EARTH CHANGE**

Name of Landowner (if not provided in Box No. 1 above)		Address		
City	State	Zip Code	Area Code/Telephone Number ( )	
Name of Individual "On Site" Responsible for Earth Change			Company	
Address	City	State	Zip Code	Area Code/Telephone Number ( )

**6. PERFORMANCE DEPOSIT (if required by the permitting agency)**

Amount Required \$ _____	<input type="checkbox"/> Cash	<input type="checkbox"/> Certified Check	<input type="checkbox"/> Letter of Credit	<input type="checkbox"/> Surety Bond
Name of Surety Company				
Address	City	State	Zip Code	Area Code/Telephone Number ( )

**I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Part 01, 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.**

Landowner's Signature	Print Name	Date
Designated Agent's Signature	Print Name	Date

**Designated agent must have a written statement from the landowner authorizing him/her to secure a permit in the landowner's name.**

**Detailed Direction to the Site:**  
**(Please indicate landmarks and if there is a sign present)**

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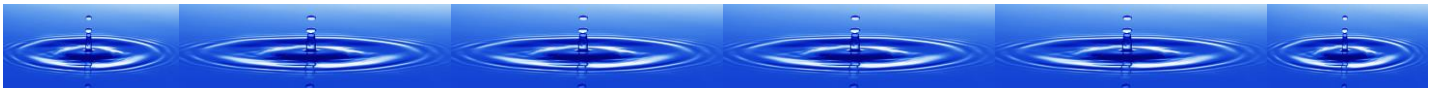
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**SITE PLAN**

**Please show the following on your site plan:**

- Existing/proposed buildings     Driveway     Well/Septic     Stockpile locations
- Distance from water     Distance from adjacent property lines
- Measurements of all site changes     Slope information     Soils information
- Permanent/temporary erosion control measures

**(\*Note: Outline the entire proposed earth change area with a dashed line\*)**



**WATERS EDGE (LAKE OR STREAM)**

**Applicant must contact the Soil Erosion Control Office if ANY CHANGES OR ALTERATIONS are necessary on the site plan as submitted in this application.**

**CHARLEVOIX COUNTY DEPARTMENT OF BUILDING SAFETY  
SOIL EROSION PROGRAM**

301 STATE STREET, STE #5, CHARLEVOIX, MICHIGAN 49720      PHONE (231) 547-7236 FAX (231) 547-7250

**PERMIT FEE SCHEDULE**

*Please make checks payable to: Department of Building Safety*

<b>Administrative Fee:</b>	<b><u>ALL</u> Soil Erosion Permits are subject to a \$45.00 Administrative Fee..... (per Charlevoix County Commissioners 10-25-17)</b>	<b>\$ 45.00 <u>XXX</u></b>
<b>Residential:</b>	<b>Pertaining to a “single-family dwelling” up to one acre disturbed area and private driveways.</b>	<b>\$ 75.00 ____</b>
	<b>Each additional five acres or fraction thereof.....</b>	<b>\$ 75.00 ____</b>
	<b>Over 2500 square fee of building area.....</b>	<b>\$200.00 ____</b>
	<b>*Fee for applications where a project has started prior to permit issuance....</b>	<b>\$150.00 ____</b>
<b>Commercial:</b>	<b>Pertaining to “multiple housing units, mobile home parks, industrial service facilities recreational facilities, subdivision, businesses, up to one acre disturbed area.</b>	<b>\$175,00 ____</b>
	<b>Each additional five acres or fraction thereof.....</b>	<b>\$125.00 ____</b>
	<b>Minor fee for no increase in impervious surface, less than 5,000 square feet of disturbed area.....</b>	<b>\$ 75.00 ____</b>
	<b>*Fee for applications where a project has started prior to permit issuance...</b>	<b>\$350.00 ____</b>
<b>Roads</b>	<b>Up to one acre of disturbed area.....</b>	<b>\$120.00 ____</b>
	<b>Each additional five acres or fractional thereof.....</b>	<b>\$ 75.00 ____</b>
	<b>*Fee for applications where a project has started prior to permit issuance....</b>	<b>\$240.00 ____</b>
<b>Pipeline &amp; Cables</b>	<b>First ½ mile.....</b>	<b>\$180.00 ____</b>
	<b>Each additional ½ mile or fraction thereof.....</b>	<b>\$135.00 ____</b>
	<b>*Fee for applications where a project has started prior to permit issuance.....</b>	<b>\$360.00 ____</b>
<b>Gravel Pits</b>	<b>Sites that are over one acre of disturbed area.....</b>	<b>\$100.00 ____</b>
	<b>Any gravel pit within 500 feet on a lake or stream.....</b>	<b>\$100.00 ____</b>

**Call 1-800-548-9158 (Extension #1)  
For Property Tax ID Number Information**

**Charlevoix County Department of Building Safety  
Soil Erosion Control Program  
301 State St., Suite #5  
Charlevoix, MI 49720  
(231) 547-7236  
Fax (231) 547-7250  
1-800-548-9147 Ext. 4**

**Date:**

**Charlevoix County Department of Building Safety  
Soil Erosion Program  
301 State St., Suite #5  
Charlevoix, MI 49720**

**To Whom It May Concern:**

I hereby authorize (Contractor name) \_\_\_\_\_ to apply  
for and sign (as the agent) the necessary Soil Erosion/Stormwater Permits for this project. Any questions  
should be directed to (Business name)\_\_\_\_\_.

**Sincerely,**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Please print name**