

## AREA OF CONTROL APPLICATION

## A permit is required from the Utility for any channel change, encroachment, filling, grading, excavating, or construction of any structure.

**30', 50', 75'** (circle the area the project falls within)

## feet of the stream bank of Garners Creek, Kankapot Creek, Plum Creek or Fox River (circle the watershed the project falls within)

Applicant Information						
Applicant Name (Indiv., Org. or Entity)		Authorized Representative		Title		
Mailing Address		City			State	Postal Code
E-mail Address		Telephone (include area code)			Fax (include area code)	
Other Contact Information (check one): Engineer / Consultant Contractor / Builder Agent / Other						
Name (Organization or Entity)		Contact Person			Telephone (include area code)	
Mailing Address		City			State	Postal Code
E-mail Address	Telephone (include area		e area code)		Fax (include area code)	
Project or Site Location						
Site Name (Project): Parce			Parcel Nun	el Number(s):		
Address / Location: Plat			Plat / CSM	/ CSM / Lot No.:		
Natures of Work:						
Effect on Drainage Way within the Area of Control:						
Certification						
<b>Certification:</b> I certify that the information contained in this form and attachments is true and accurate. I understand that failure to comply with any or all of the provisions of the Utility's ordinances may result in notices, fines / forfeitures, stop work orders, permit revocation, and cease & desist orders.						
Applicant Signature				Date Signed		
LEAVE BLANK – FOR ADMINSTRATIVE USE ONLY						
Date Application Received:	Fee Received:			Plan Set / SWMP Included?:		
Date Permit Issued:	Permit No:			Issued By:		