Russell Township Zoning Office

8501 Kinsman Road, PO Box 522

Novelty OH 44072

Phone: (440) 338-5811 ◆ Fax: (440) 338-7782 or 1965

WATER MANAGEMENT AND SEDIMENT CONTROL PLAN (WMSC) APPLICATION

- For Russell Township Use Only -						
Date Submittal Received	Date Fee Received	Fee				
S	SITE INFORMATION					
Owner's Name	Address					
Sublot# or Parcel # (If Applicable)	Watershed					
Total Site Acreage (Acres)(Lot size)	Total Disturbed Square (Includes clearing, grubbing,	Footage (square feet)excavating, filing, grading and off-site borrow areas)				
Percentage of disturbed area to entire lot (%)(Total disturbed square footage/Total Site Square Footage) x	100)					
Estimate of impervious area created by project						
Percentage imperviousness created on lot(Total impervious area/Total Site Square Footage) x 100)						
Has the Inspection and Maintenance Agreement b	peen submitted?					
If not, expected date of submittal						
Description of prior land uses						
	NTACT INFORMATION ct name, address, phone, fax and e-ma	ail if applicable)				
Professional Engineer certifying plans and calcula	ations					
Owner of development site						
Other Plan Preparer (if applicable)						
Signature of Applicant		_ Continued over $ ightarrow$				

ADDITIONAL SITE INFORMATION

CONSERVATION EASEMENTS OR OTHER RESTRICTIONS

Are there any conservation easements or restrictive uses on the property?						
If so, please explain/list						
WETLANDS						
Are there jurisdictional wetlands on the property that will be disturbed or impacted?						
If yes, date of Jurisdictional Determination(include copy of letter)						
If yes, have you include	d all permits?					
	_					
	Date	Permit	Issuing Agency			
List Permits obtained (copy of permits must be submitted with plan)						
		STREAMS				
Are there jurisdictional s	streams on the property	that will be disturbed or ir	mpacted?			
·						
(include copy of letter)						
If yes, have you include	d all permits?					
	Date	Permit	Issuing Agency			
List Permits obtained (copy of permits must be submitted with plan)						

IMPORTANT – This form must be completed, prior to work starting, by each party responsible for any part of the project, such as excavation, construction, final landscaping. The column "Activity responsible for" must be filled in.

INSPECTION AND MAINTENANCE AGREEMENT

Project Name:	
Owner Name and Address:	
Description of activity:	

I, the undersigned, certify that I understand and will adhere to the requirements, terms, and conditions of the Water Management and Sediment Control Plan reviewed and approved by the Geauga Soil and Water Conservation District or the Russell Township Zoning Inspector for compliance with the *Geauga County Water Management and Sediment Control Regulations* and the Russell Township Zoning Resolution, Section 4.13, for the above referenced project.

Signature of Responsible Party	Contractor (name, address, phone)	Activity responsible for:
Signature	Name	
D	Address	
Print Name:		
Date:	Phone	
Signature	Name	
D: AM	Address	
Print Name:		
Date:	Phone	
Signature	Name	
Print Name:	Address	
	DI .	
Date:	Phone	
a:	N	
Signature	Name	
Print Name:	Address	
Date:	Phone	