

**CITY OF CHEBOYGAN, MICHIGAN  
STORMWATER FLOW CONTROL PERMIT APPLICATION**

**OFFICE USE ONLY:**

\_\_\_\_\_  
(Property Owner's Name)  
\_\_\_\_\_  
(address)  
\_\_\_\_\_  
(city, state, zip code)  
\_\_\_\_\_  
home telephone                  business telephone

Permit/Application No. \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Fee\* Received: \_\_\_\_\_  
(\*fee - \$275 – subject to change)

\_\_\_\_\_  
(Developer's name)  
\_\_\_\_\_  
(address)  
\_\_\_\_\_  
(telephone)                                  (fax)

\_\_\_\_\_  
(Engineer/Consultant's name)  
\_\_\_\_\_  
(address)  
\_\_\_\_\_  
(telephone)                                  (fax)

**SITE ADDRESS:** \_\_\_\_\_  
**PARCEL SIZE:** \_\_\_\_\_ **ZONING DISTRICT OF PROPERTY:** \_\_\_\_\_  
**PROPERTY DESCRIPTION:** \_\_\_\_\_

**PROPERTY TAX I.D. NUMBER:** 16-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
**ESTIMATED CONSTRUCTION PERIOD:** Begin: \_\_\_\_\_ End: \_\_\_\_\_

Yes    No  
\_\_\_\_  \_\_\_\_  Is one (1) copy of the proposed soil erosion sedimentation plan & permit per the  
                  Cheboygan County Ordinance attached?  
\_\_\_\_  \_\_\_\_  Are two (2) signed copies of Stormwater Flow Control Plan attached?

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**APPROVAL OF STORMWATER FLOW CONTROL PLAN:**

\_\_\_\_\_  
DATE: \_\_\_\_\_  
**Signature – City Engineer**

The issuance of this Permit does not relieve the property owner of the need to obtain other permits or approvals as may be required from any federal, state, county or other local agency.

**This Permit shall expire on** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Signature-City Manager**

(Permit shall terminate automatically if activity has not commenced by the expiration date.)