



Storm Water Development Checklist

Date: _____

Pre-Con Meeting: _____

Project Name (as approved): _____

Company Name (including D.B.A.): _____

Legal Owner: _____

Address: _____ Email: _____

Phone: _____ Cell: _____ Fax: _____

Engineering Representative: _____ Legal Proof: _____
(Notarized letter from owner)

Address: _____ Email: _____

Phone: _____ Cell: _____ Fax: _____

Copies sent to Stormwater Dept.:

NOI: _____ (Date received) NOC: _____ (Date received) NPDES: _____ (Date received)

ARAP: _____ (Date received) SWPPP (As submitted to TDEC): _____ (Date received) Preliminary Geo-Tech: _____ (Date received)

Roadway Maintenance Surety:

\$30.00 per linear foot per lane traveled to state route or per connections to truck haul route @ \$100,000.00 per connection _____ Connection to state route

Distance from Site to Nearest State Route: _____ Road Surety Amt: _____

Copy of Blasting License from State, Photo ID of trigger man and proof of insurance:

(Date received)

TDEC Level One Person's Info:

Copy of Certificate or Card:

(Date received)

Name: _____

Address: _____ Email: _____

Phone: _____ Cell: _____ Fax: _____

Contractor's Info:

Copy of Contractor's License:

(Date received)

Name: _____

Address: _____ Email: _____

Phone: _____ Cell: _____ Fax: _____

Office Use:

Storm Water Management Maintenance Agreement:

Received: _____
(Date)

Recorded: _____
(Date)

1 Full size plans: _____ (2) 11X17: _____ PDF/DWG: _____
(Approved site plans stamped/signed by Shane Shamanur) (CD of plans)

Land Disturbance Permit #: _____ Fee Amount: _____

Plan Review Permit #: _____ Fee Amount: _____

Conditions/Comments: _____

Erosion Control Permit #: _____ Fee Amount: _____

Conditions/Comments: _____