

STORMWATER MANAGEMENT/ENGINEERING APPLICATION

Date	Permit #
Project Name/Site Location	
Owner/Agent Name	Phone #
Owner Address	
Contact Name/ Title	Phone#
Contact Address	
DEVELOPER/BUILDER CE	CRTIFICATION
As representative for the above proje	ect I do agree to the following requirement(s).
All information set forth in this plan accurately conveys this site's conditions and meets the current Stormwater Management ordinance to the best of my knowledge.	
exemption/waiver request will adher volumes I & II and the code of the Testormwater Management and Stormwall information set forth in this plan current Stormwater Management ordapproved on this plan will be inspect Structural Stormwater Management rultimately the responsibility of the Aguidelines. As-built survey is require	itical Area, calculations, design, construction, et to the current 2000 Maryland Stormwater Design Manual down of Ocean City, Section 30-141 through 30-153, for water Plan for the this site and the Critical Area Program. accurately conveys this site's conditions and meets the dinance to the best of my knowledge. All measures ted and maintained according to the recorded agreement. The measures are covered under the architect affidavit and are architect that the construction meets the City Code and State red. If approved Stormwater Management measures are not the Stormwater Management Plan will need to be and approval.
	ntrol devices will protect all structural devices for intributing areas have passed final stabilization inspection.
See reverse side for Engineering and	Stormwater Management conditions.
Applicant Signature	Date
Owner Signature	 Date