DUPAGE COUNTY STORMWATER MANAGEMENT CERTIFICATION APPLICATION (1/2)

1. Community and Status	2. Date of Application	3. Stormwater Application No. (to be assigned by community)	4. DuPage County Tracking No.
Warrenville ☐ Non ☐ Partial ☑ Complete		3 2	

5. Applicant:

Name: _____

Company Name: _____

Address: _____

City, ST, Zip: _____

Phone: _____

Email: _____

6. Owner:

Name: _____

Company Name: _____

Address: _____

City, ST, Zip: _____

Phone: _____

Email: _____

7. Description of Proposed Development:

8. Location of Development:

Address: _____

_____

Municipality: Warrenville

Watershed Planning Area & Trib: West Branch DuPage River

9. Legal Description

_____ _____ _____

¼ Section Township Range

PIN _____ - _____ - _____ - _____

PIN _____ - _____ - _____ - _____

10. Check all of the conditions which apply:

☐ Flood Plain ☐ Stormwater Detention ☐ Best Management Practices ☐ Soil Erosion & Sediment Control

☐ Wetland ☐ Wetland Buffer ☐ Riparian Buffer

11. Acknowledgement of On-Site Infiltration PCBMPs

I acknowledge that I have used my best effort to identify zones for which on-site infiltration are prohibited for Post Construction Best Management Practices (PCBMPs) in accordance with the Ordinance (15-63.B)

_____ _____ _____

Signature of Applicant Print Name Date

12. Freedom of Information Act (FOIA)

I acknowledge that all architects' drawings, engineers' technical submissions and other construction-related technical documents containing stormwater management information submitted with this application may be made available for inspection or copying by the County, not-withstanding 5 ILCS 140/7(1)(k), upon the written request for such materials. Such productions will be restricted to the following parties: i) the Applicant ii) any subsequent owner of the subject property; or iii) any governmental unit having planning or drainage jurisdiction within 1 and ½ mile of the subject property.

_____ _____ _____

Signature of Applicant Print Name Date

_____ _____ _____

Signature of Owner Print Name Date

13. Statement of Opinion for Minimum Criteria for Stormwater Management

I am a Professional Engineer under the employment of the Applicant. It is my professional opinion that the development meets the minimum criteria for stormwater management in accordance with the Ordinance (15-36)

_____ _____ _____

Signature of Professional Engineer Print Name Date

_____ Community Copy _____ DuPage County SM Copy _____ Applicant Copy

DUPAGE COUNTY STORMWATER MANAGEMENT CERTIFICATION APPLICATION (2/2)

Community Tracking No: ___ ___ 3 2 ___ ___ ___ ___	**DuPage County Tracking No:**

14. Statement of Opinion for Presence of Flood Plain, Wetlands, and Buffers (15-47-A.5)

☐ I acknowledge the presence of flood plain.	☐ I acknowledge the presence of wetlands.	☐ I acknowledge the presence of buffers.
☐ I deny the presence of flood plain.	☐ I deny the presence of wetlands.	☐ I deny the presence of buffers.
Signature of Qualified Professional ____ Date	Signature of Qualified Professional ____ Date	Signature of Qualified Professional ____ Date
Printed Name	Printed Name	Printed Name

15. Soil Erosion & Sediment Control Submittal Requirements (15-50.B)
(For developments with less than 1 acre of land disturbance that are not part of a larger common plan)

I certify that the development meets the soil erosion and sediment control design criteria found in Article VII have been met.

Signature of Qualified Designer ____ Print Name ____ Date ____

16. Soil Erosion & Sediment Control Requirements (15-59.W) **(For developments with land disturbing activities greater than 1 acre)**

I acknowledge that the site complies with the IEPA NPDES ILR10 Permit.

Signature of Applicant ____ Print Name ____ Date ____

17. Acknowledgement of Required As-Built Plans (15-47.B)

I acknowledge that a record drawing signed by either a Professional Engineer or a Professional Land Surveyor depicting the as-constructed size, rim, and invert elevations of pipes, stormwater structures and culverts, and contours and flood storage volumes of all required basins of the major stormwater systems and minor stormwater systems shall be submitted for review and approval upon completion of the stormwater facilities.

Signature of Owner ____ Print Name ____ Date ____

18. Intentional Misrepresentation Under Penalty of Perjury

I declare that I have examined and/or made this application and rider, and it is true and correct to the best of my knowledge and belief. I realize that the information that I have affirmed hereon forms a basis for the issuance of the stormwater management certification(s) herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any provision of any applicable ordinance or to excuse the owner or his successors in title from complying therewith. The Owner and Applicant each understand and agree to construct said improvement in compliance with all provisions of the applicable ordinances.

Signature of Applicant ____ Print Name ____ Date ____

Signature of Owner ____ Print Name ____ Date ____

DO NOTWRITE BELOW THIS LINE

19. Security (15-54)

Stormwater Facilities $ _____

Wetlands/Natural Area $ _____

SE/SC $ _____

Total $ _____

20. Stormwater Fees

Community Review $ _____

DCSM Review $ _____

Fee-in-Lieu $_____ Wetland $ _____ BMP

Seal/Stamp
Certifications expire December 31st of the third year of Certification or Authorization. whichever is earlier.

21. Final Approvals (See Certification letter for special conditions and general conditions.)

Community Certification ____ Date ____ Approved by/title

County Authorization ____ Date ____ Approved by/title

_____ Community Copy _____ DuPage County SM Copy _____ Applicant Copy