

DEPARTMENT OF TRANSPORTATION
LOCATION AND DESIGN
VSMP CONSTRUCTION PERMIT INFORMATION

Date: _____

Please check applicable box

Original Application

Revised Application

Original Permit Number: _____

1. District: _____

2. Residency: _____

3. County/City: _____

4. Project #: _____

5. UPC #: _____

6. Project Location:

Latitude: _____, Longitude: _____, or From: _____, To: _____

7. Off-site support facilities (e.g., borrow/disposal/fueling/storage areas) are to be covered by the VSMP permit for this land disturbance activity. Will any such areas be required for this activity? (If locations of such areas are not known at the time of the original application but it is known that off-site support facilities will be required then, answer 'yes') (Yes or No) _____

If yes, list the location of all known off-site support facilities that are to be covered by this permit.

a. County/City: _____, Latitude: _____, Longitude: _____, or Location: _____

8. Name of the Receiving Water(s): _____

(List all applicable)

9. If the Discharge is Through a Municipal Separate Storm Sewer System (MS4) the Name of the Municipal Operator of the Storm Sewer: _____

10. Estimated Project Start Date: _____ Estimated Project Completion Date: _____

11. Total Area Land Area of the development(to the nearest one-tenth acre): _____

12. Estimated Area to be Disturbed: _____

(To the nearest one-tenth acre and including any potential area for offsite support activities to be covered by the permit)

13. Map: Attach a topographic map or other map which clearly shows the location of the land disturbing activity, the limits of the project (include any offsite areas that will be covered under this permit), and the receiving stream(s) for the stormwater discharge(s).

14. Location where the plans may be viewed (Residency or other office): _____

15. Responsible Land Disturber (RLD) for the land disturbing activity:

Name: _____

Title: _____

Phone Number: _____