

Appendix K

**Low-Impact GESC
Permit Application**

Case No:
Section:

Permit No:

ARAPAHOE COUNTY
PUBLIC WORKS AND DEVELOPMENT
ENGINEERING DIVISION
(See Reverse For Terms and Conditions)
720 874-6500

GRADING, EROSION AND SEDIMENT CONTROL (GESC) LOW IMPACT PERMIT APPLICATION

Each question must be fully and accurately answered. No action can be taken on this application until all questions have been answered.
PLEASE PRINT, except for signature.

Project Owner/Developer _____	Contractor _____
Address _____	Address _____
Telephone # _____ Fax _____	Telephone # _____ Fax _____
Contact Name _____	Contact Name _____
Acres (including grading/excavation/fill) _____	Estimated material volume _____ cu yd
Subdivision/Project Name _____	Section _____, T _____ S, R _____ W
Construction Location _____	

Project Description: Use Additional Sheets if necessary _____ _____ _____ _____	Required Information: ___1. General location map-at a scale of 1-inch to 1000-feet to 1-inch to 8000-feet indicating the general vicinity of site location, including all roadways. ___2. Detailed plan showing: limits of work area, proximity of work area to property lines, all surface water hydrologic features within 100 feet of proposed work area, directional flow of surface water runoff, and proposed erosion and sediment controls.
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By signing below, both applicants hereby apply for an ARAPAHOE COUNTY GESC Permit for the aforementioned property and certify as follows:

1. To the best of my/our knowledge, the information provided herein is correct.
2. A GESC Plan for the disturbed area on this site was prepared and submitted in accordance with the Arapahoe County GESC Manual, as amended and the Arapahoe County Stormwater Manual.
3. I certify I am legally authorized to sign on behalf of and bind the above-listed entity.
The GESC Permit is granted with the explicit understanding that it is the permittee's responsibility to:
 1. Comply with all requirements in accordance with the Arapahoe County GESC Manual, accepted GESC Plan, and GESC Permit
 2. Allow Arapahoe County, or its designee, unrestricted access to the site to conduct regular site inspections and to perform corrective actions in the event the Permittee fails to provide sufficient remedies to correct site deficiencies.
 3. Immediately cease land-disturbing activities upon receipt of a written Stop Work Order from an authorized representative of Arapahoe County. A Stop Work Order shall be issued and this permit revoked if the permittees are not in compliance with the GESC Permit, GESC Plan and GESC Criteria Manual or the permittees fail to take corrective action within the time specified on the written notification of such non-compliance.
 4. Understand that in addition to other remedies, a violation of the GESC Permits shall constitute a violation of the Arapahoe County Zoning Resolution; and
 5. Understand any approval obtained from Arapahoe County does not absolve the need to comply with the requirements of Sections 6 and 7 of the Endangered Species Act of 1973, 16 U.S.C. 11531, et seq., as amended, or with any other applicable federal, state or local laws or regulations.
 6. Eliminate designated hazards whenever an Arapahoe County representative determines that an excavation or embankment of fill on private property jeopardizes life and limb, or endangers property, or adversely affects the safety, use, or stability of a public way or drainage channel. Failure to eliminate a designated hazard within 48 hours will result in issuance of a stop work order.

Property Owner: _____	Date: _____	Contractor: _____	Date: _____
Print Name: _____		Print Name: _____	

ARAPAHOE COUNTY OPEN SPACE SALES & USE TAX FEE
List invoice costs for construction and building material used with this permit

Value of Materials: \$ _____ Open Space Tax (.25%) Fee Due: _____ Tax Exempt: Yes or No Tax I.D. Number _____

Permit Approval (Staff Use Only)

Base Fee:	Additional Cost: \$ _____ x _____ disturbed acres = \$ _____	Base Fee: \$ _____ Penalty: \$ _____ Total Fee: \$ _____	Renewal _____ Transfer _____
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Engineer's Estimate \$ _____ Total Security \$ _____ Security Received Y N

STAFF APPROVALS

Preliminary Plan/Site Plan Approved Y <input type="checkbox"/> N <input type="checkbox"/> Development Review Engineer: _____ Date: _____	Land Development Inspector: _____ Date: _____
Initial BMP's Field Approved _____ Date _____ GESC Inspector: _____ Date _____	Cash <input type="checkbox"/> Check <input type="checkbox"/> Check# _____ Amount \$ _____ Date Paid _____ Issued By _____ Date _____