

STORMWATER APPLICATION  
City of McCall

---

Fill in all information. Submit one copy of signed application and three copies of Stormwater Management Plan/Report to the City Engineer.

---

1. Project Name: \_\_\_\_\_  
Location: \_\_\_\_\_
  
2. Owner's Name: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_
  
3. Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
a. Total property area, in acres. \_\_\_\_\_  
b. Proposed impervious surface (asphalt, rooftop, concrete, sidewalk, etc.) in square feet. \_\_\_\_\_  
\_\_\_\_\_  
c. Describe existing vegetation present on site. \_\_\_\_\_  
\_\_\_\_\_  
d. Start date of construction. \_\_\_\_\_  
e. Estimated length of time to complete improvements. \_\_\_\_\_
  
4. Stormwater Management Plan/Report attached? Yes \_\_\_ No \_\_\_
  
5. Circle the section of the Stormwater Management Plan/Report Checklist which are applicable to project.  
A \_\_\_ B \_\_\_ C \_\_\_ D \_\_\_ E \_\_\_ F \_\_\_
  
6. Party responsible for operation and maintenance of project, including maintenance of temporary and permanent Best Management Practices:

Name	Title	Signature	Date
Address	Daytime Phone	After Hours Phone	

Do not write below this line.

---

This Stormwater Management Plan/Report is:

Approved: \_\_\_\_\_

Not Approved: \_\_\_\_\_

Approved, with conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By The City of McCall

---

Representative	Title	Signature	Date
----------------	-------	-----------	------