



Engineering Department

Stormwater Permit Application Packet

Per Chapter 67 of the Walker City Code of Ordinances

4243 Remembrance Rd NW
Walker, MI 49534
Phone: (616) 453-6311
Fax: (616) 791-6808

City of Walker Stormwater Permit Application Packet

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Stormwater Contact Information

ENGINEERING DEPARTMENT: General #: 453-6311

Scott Conners P.E.
City Engineer
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Rachell Nagorsen
Engineering Programs Coordinator
P: (616) 791-6327
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rnagorsen@walker.city

DEPARTMENT OF PUBLIC WORKS: General #: 791-6854

Mark Koning
Director of Public Works
P: (616) 791-6868
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mkoning@walker.city

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P: (616) 791-6867
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gpostema@walker.city

KENT COUNTY DRAIN COMMISSION:

1500 Scribner Ave
GR, MI 49504
P: (616) 336-3688
F: (616) 336-3575
drain-info@kentcounty.org

Stormwater Permit Application Checklist

Required for Permit Issue:

- Complete Permit Application
- Letter of Authorization
- 1 Complete Site Plan: Hard Copy & PDF or TIF file
- Complete Stormwater Pollution Prevention Plan Checklist
- Signed/Notarized Stormwater Management Plan & Maintenance Agreement
- Permit Fee
- \$5,000 Deposit: Letter of Irrevocable Credit, Bank Certified Check or Cash Deposit
- Acquire Soil Erosion & Sedimentation Control Permit.

To Close Permit:

- Site Complete & Vegetated
- Submission of Asbuilt Certification(s)
- Submission of Digital Stormwater Asbuilt(s)
Deposit is refunded upon permit closure

Forms and Applications can be found at:

<http://www.walker.city/government/departments/engineering/index.php>

Program Contact:

Rachell Nagorsen

Engineering Programs Coordinator | Engineering Department

4243 Remembrance Rd NW | Walker, MI 49534

Phone: (616) 791-6327 | Fax: (616) 791-6808

Email: rnagorsen@walker.city

STORMWATER APPLICATION & PERMIT

Stormwater Permit Approval <i>(for office use only)</i>			
PERMIT #			
APPLICATION FEE: \$	RECEIPT #:	DEPOSIT: \$5,000.00	RECEIPT/LOC #:
DATE PAID:			
ISSUED:	EXPIRES:	BY: _____ CITY ENGINEER	

SITE ADDRESS: _____
 PERMANENT PARCEL NUMBER (PPN): _____
 SIZE OF PARCEL(S): _____ acres. DISTURBED AREA: _____ acres
 PROJECT START DATE: _____ ESTIMATED COMPLETION DATE: _____

APPLICANT: OWNER AUTHORIZED AGENT *(check one)*

NAME: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE: _____ EMAIL: _____ FAX: _____

NAME OF PROPERTY OWNER OF RECORD, IF OTHER THAN APPLICANT:

NAME: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE: _____ EMAIL: _____ FAX: _____

EMERGENCY CONTACT #: _____

PERSON ONSITE RESPONSIBLE FOR EARTH CHANGE:

NAME: _____
 COMPANY: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE: _____ EMAIL: _____ FAX: _____

STORMWATER OPERATOR RESPONSIBLE FOR SITE INSPECTIONS:

Note: Inspections are to be conducted once a week and once within 24 hours of each rain event and submitted to the City of Walker Engineering Department.

NAME: _____
 COMPANY: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE: _____ EMAIL: _____ FAX: _____

Construction Site Stormwater Operator registration number assigned by Department of Environmental Quality: # _____

PROJECT SITE PLANS:

COMPANY NAME: _____
PROFESSIONAL ENGINEER: _____
COMPANY: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____ EMAIL: _____ FAX: _____

I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Chapter 67 of the City of Walker Code of Ordinances.

Signature: _____ Title: _____ Date: _____

Print Name: _____

**STORMWATER DISCHARGE PERMIT
LETTER OF AUTHORIZATION**

Name of Project: _____

Location of Project: _____

Permanent Parcel #: _____

As owner of the property described above, I authorize the person indicated below to act on my behalf for the purpose of this application for a Stormwater Discharge Permit pursuant to Chapter 67 of the Walker Code of Ordinances. I assume final responsibility for all completed work and understand that liability arising from any unlawful earth change will be assessed against me.

Owner (Signature)

Date

Owner (Print or Type Name)

Date

Owners Authorized Agent (Print or Type Name)

Company Name

**STORMWATER POLLUTION PREVENTION PLAN
CHECKLIST & REVIEW
*To be Completed & Signed by Applicant***

	Provided/ Satisfactory	<i>Comments</i>
General		
1. Project or plat name.	_____	_____
2. Location map.	_____	_____
3. Proprietor's name, address, phone number, and e-mail address.	_____	_____
4. Engineer/Architect/Surveyor's name, address, phone number, and e-mail address.	_____	_____
5. North arrow and scale (scale is required to be 1 inch =100 feet or larger).	_____	_____
6. Project or plat boundary.	_____	_____
7. Identification of all adjoining parcels by address.	_____	_____
8. Lot dimensions (scaled or computed).	_____	_____
9. Lot numbers (individual addresses if a Plat, PUD, or Site Condo).	_____	_____
10. Building setback lines.	_____	_____

Topographical

11. Existing buildings (label those under construction with address and proposed lowest foundation opening elevations).	_____	_____
12. Existing and proposed roads (name, ROW width, and type of surface).	_____	_____
13. Existing and proposed land surface contours (minimum 2.0-foot contour interval referenced to a national datum).	_____	_____
14. No slopes greater than 1 on 3 without structural improvements.	_____	_____
15. Available soils data, soil boring logs, and locations (include ground elevation and water table information).	_____	_____

Drainage

- 16. Offsite watershed areas (with boundaries and acreage to be shown in drainage calcs). _____
- 17. Existing creeks, streams, ditches, and other surface drainage ways. _____
- 18. All existing storm sewer and structures (with proper labeling of type, size, invert elevation, and ownership). _____
- 19. County, municipal, MDOT, and private drains (permission required to connect). _____
- 20. Proposed drainage systems (clearly identify all open and enclosed portions, size, inverts, grade, and proposed ownership). _____
- 21. 100 Year floodplain contour (if applicable). _____

- 22. Wetland boundaries with determination date and company. _____
- 23. Existing and proposed utilities. _____
- 24. Proposed stormwater detention/infiltration basins. _____
- 25. Site's stormwater runoff discharge location (including roof water). _____
- 26. All soil erosion controls shown on the plan. _____

Stormwater Design

- 27. Calculations (per Kent County Drain Commission Rules). _____
- 28. Sealed by Professional Engineer on company letterhead with date performed. _____
- 29. On-site sewers designed for 10 year storm event. _____
- 30. Flood protection from 100 year storm event. _____
- 31. Minimum basement elevations provided. _____

Detention/Infiltration Basins

- 32. Required volume/release rate. _____

- 33. Adequate volume provided. _____
- 34. Side slopes including surface treatments. _____
- 35. Overflow spillway & emergency overflow floodway. _____
- 36. Hydraulic calculations for transfer or outlet pipe. _____
- 37. Minimum basement floor elevations & minimum building opening elevations established. _____
- 38. Subsurface storage details (if applicable). _____

Easements

- 39. Existing and proposed utility easements (labeled with dimensions, purpose, and easement recipient). _____
- 40. Existing and proposed drainage easements. _____
- 41. Offsite drainage easements or right-of-way. _____
- 42. Existing and proposed access to the property and drainage structures. _____

Maintenance

- 43. Identification of the agency proposed to assume ownership of the drainage system (including the detention and/or infiltration basins). _____

Fee

- 44. Permit fee. _____

I certify that the Stormwater Pollution Prevention Plan being submitted has been reviewed using this checklist:

Signature: _____

Date: _____

Print Name: _____

STORMWATER PERMIT FEE SCHEDULE

<u>Area of Development Site</u>	<u>Fee</u>
3 acres or less	\$200
At least 3 acres but less than 5 acres	\$350
At least 5 acres but less than 10 acres	\$500
10 acres or more	\$750

City of Walker
Engineering Department
4243 Remembrance Rd NW
Certification
Walker, MI 49544
(616) 543-6311

Stormwater Asbuilt

(Print Clearly or Type):

Permit # _____

Project Name: _____

Project Location: _____

Select One:

- I hereby certify that all components of this stormwater management system have been built in accordance with the approved plans and specifications.

- There are deviations from the approved plans. I certify that the changes will not have any effect on design by producing any addition to flow, rate, velocity of storm water, or frequency and level of high water mark. The changes are listed on the plan in red and itemized in the attached narrative.

Name

Signature

Company Name

Michigan Registration #

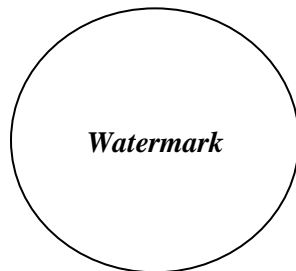
Company Address

Date

City/State/Zip

Telephone #

Fax



Please Note: Digital Asbuilts are required to be submitted to the City of Walker. See Asbuilt submission form.

City of Walker Street Improvement & Stormwater As-Built Submission Form

In order to keep the City of Walker's Regional Geographic Information System (REGIS) updated with the most current information, stormwater as-builts are required to be submitted to the **City of Walker Engineering Department, 4243 Remembrance Rd NW, Walker MI, 49544.**

The as-builts are to be submitted digitally on a CD in a .TIF format. A printed hard copy (at maximum resolution) of the As Built is also to be submitted with the CD.

Project Information:

Project/Street Name:	
Project Address:	
Cross Streets:	
PPN:	
Completion Date:	

Submitters Information:

Company Name:	
Contacts Name:	
Contacts Title:	
Address:	
City/State/Zip:	
Phone Number:	
Fax:	
Email:	

Digital File Information (on CD):

Has Digital As-Built Been submitted?	
File Name:	
File Type:	

Hard Copy Information:

Has an As-built Hardcopy Been Submitted?	
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Submitted By: _____ Date: _____
(Signature Required)