

Shakopee Mdewakanton Sioux Community

Permit #: _____

Application Submittal Date: _____

SITE DEVELOPMENT PERMIT *TRANSFER* APPLICATION

	NAME	ADDRESS	TELEPHONE/FAX
1. OWNER/LESSEE			
2. ORIGINAL APPLICANT			Telephone: :
3. NEW APPLICANT			Telephone: Fax:
4. CONTRACTOR OR SUBCONTRACTOR OVERSEEING SITE DISTURBANCE			Telephone: Fax:

SITE ADDRESS: _____

TRANSFER REQUEST DATE: _____

PROJECT END DATE: _____

TYPE OF NEW DISTURBANCE:

 Residential

 Commercial

 Institutional

 Landscaping
 Industrial

 Agricultural

 Other _____

ESTIMATED COST OF EROSION CONTROL \$ _____	IF LANDSCAPING IS THE PRIMARY ACTIVITY – ESTIMATE COST	\$ _____
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SITE AREA (ft ² if < 1 acre) _____	AREA OF NEW DISTURBANCE (ft ² if < 1 acre)	_____
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REASON FOR PERMIT TRANSFER:

	Initials			
I am assuming control of the original erosion and sediment control plan:		Check One:	<input type="checkbox"/> With modifications	
			<input type="checkbox"/> In its entirety	
I understand that as the new applicant I am responsible for maintaining existing erosion control measures and/or installing new erosion control measures in such a fashion as to prevent sediment from leaving this site. These measures will be installed and maintained in accordance with the requirements of the SMSC Tribal Manual of Approved Erosion Control and Storm Water Management Practices.				
I understand that the SMSC may issue stop work orders and/or monetary penalties as enforcement measures.				
I understand that if the erosion and/or storm water control measures are not installed and maintained properly the SMSC may complete the work at the expense of the new applicant.				

<i>Signature of contractor overseeing site disturbance:</i>	<i>Date:</i>	<i>Signature of new applicant:</i>	<i>Date:</i>
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ADMINISTRATIVE USE ONLY

FEE \$ _____	Fee Paid: Yes No	APPROVAL SIGNATURE: _____	Date: _____
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