Community & Economic Development Department www.adcogov.org



4430 South Adams County Parkway 1st Floor, Suite W2000 Brighton, CO 80601-8204 PHONE 720.523.6800 FAX 720.523.6998

## **EROSION AND SEDIMENT CONTROL**

All applications shall be submitted electronically to <a href="mailto:epermitcenter@adcogov.org">epermitcenter@adcogov.org</a>. If the submittal is too large to email as an attachment, the application may be sent as an unlocked OneDrive link. Alternatively, the application may be delivered on a flash drive to the One-Stop Customer Service Center. All documents should be combined in a single PDF. Once a complete application has been received, fees will be invoiced and payable online at <a href="https://permits.adcogov.org/CitizenAccess/">https://permits.adcogov.org/CitizenAccess/</a>.

- 1. Development Application Form (pg. 2)
- 2. Application Fee (see table below)
- 3. Erosion and Sediment Control Plans:
  - Erosion and Sediment Control (ESC) plans are construction plans showing the proposed Best Management Practices, or BMP's, that will be used to mitigate erosion and the transport of sediment from a site under construction.
  - ESC plans are often done in three (3) phases: Initial, Interim and, Final.
  - These plans must also include installation details for each of the BMP's.

Application Fees:	Amount:	Due:
Erosion and Sediment Control	\$500	After complete application received

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## **Application Type:**

Erosion and Sediment Control Floodplain Use Permit On-Site Grading and Drainage		Street Construction Plans Subdivision Engineering Review Traffic Impact Study/ Analysis					
				AME:			
		Phone #:					
ip:							
:		Email:					
		Phone #:					
ip:							
:		Email:					
REPRESENTATIVE (Consultan	nt, Engir	neer, Surve	yor, Architect, etc.)				
		Phone #:					
ip:							
:		Email:					
	Floodplain Use Permit On-Site Grading and Drainage  AME:	Floodplain Use Permit On-Site Grading and Drainage  AME:	Floodplain Use Permit On-Site Grading and Drainage  Traffic  AME:  Phone #:  ip:  Phone #:  Frail:  Phone #:  Phone #:  Frail:  Phone #:  Phone #:  Frail:  Phone #:  Phone #:				

## **DESCRIPTION OF SITE**

Address:	
City, State, Zip:	
Area (acres or square feet):	
Tax Assessor Parcel Number	
Existing Zoning:	
Existing Land Use:	
Proposed Land Use:	
Have you attende	d a Conceptual Review? YES NO NO
If Yes, please list	PRE#:
under the author pertinent requirem Fee is non-refund	at I am making this application as owner of the above described property or acting rity of the owner (attached authorization, if not owner). I am familiar with all nents, procedures, and fees of the County. I understand that the Application Review dable. All statements made on this form and additional application materials are my knowledge and belief.
Name:	Date:
	Owner's Printed Name
Name:	
	Owner's Signature