TO: GLOUCESTER CO SOIL CONSERVATION DISTRICT

I hereby formally request recertification of the soil erosion and sediment control plan for a period of 3 ½ years for the following project:

1. Name of Project:_____
2. SCD Application No._____
3. Project Owner Name(s):_____
4. Date of Last Revision to Site Plan:_____
5. Date of Last Revision to Erosion Control Plan:_____

I certify that all revisions to the soil erosion and sediment control plan have been certified by the district and agree as follows:

a. Approval of this request will confer recertification of the existing soil erosion and sediment control plan and allow for continuation of the project.

b. Recertification extends the requirements of the previous application identified in (2) above which shall be appended herewith.

c. All terms and conditions regarding compliance with this application and certified plan shall remain in effect including payment of all fees prescribed by the district fee schedule.

d. That upon completion of the project, the district will be promptly notified. Authorization to occupy or otherwise utilize the project is conditioned upon district issuance of a Report of Compliance with the certified plan.

e. Where changes to the application have occurred including ownership, a revised and signed application form shall be included with this request for Recertification. If no revised application is forwarded, the applicant certifies that no changes to the Soil Erosion and Sediment Control Plan or Application have been made.

Applicant Certification*

_____ _____

Signature of Applicant Date

_____

Applicant Name (print)

***if other than project owner, written authorization of owner must be attached**

This request has been: Certified Certified w/conditions Denied

_____ _____

Signature of District Official **Date**