



LAND-DISTURBING PERMIT APPLICATION – FORM LDA-002

Patrick County ESC Office

P.O. Box 466/106 Rucker Stuart, VA 24174

Phone: 276-694-6094 Fax: 276-694-2160

www.co.patrick.va.us

The following items must be submitted with this form before a permit will be issued:

1. Two (2) copies of an Erosion & Sediment Control Plan for the land-disturbing activity consistent with the standards contained within the latest edition of the Virginia Erosion & Sediment Control Manual.
2. Copy of Responsible Land Disturber certification card issued by Virginia Department of Environmental Quality.
3. If land-disturbance is 1 acre or more, or less than 1 acre and part of a common plan of development, a completed Stormwater Management General Permit application.

Applicant Name:			
Applicant Address:			
Applicant Phone:		Email:	
Property Owner Name: <i>(if different from above)</i>			
Property Owner Address: <i>(if different from above)</i>			
Property Owner Phone: <i>(if different from above)</i>		Email:	
Jobsite Address:			

Land-Disturbance Information	Land-disturbing activities in excess of 10,000 sq. ft. will be undertaken on the following land parcel(s)			
	Parcel #1		Parcel #2	
	Tax Map ID: _____		Tax Map ID: _____	
	Parcel Size: _____		Parcel Size: _____	
	Subdivision Lot #: _____		Subdivision Lot #: _____	
	Parcel #3		Parcel #4	
	Tax Map ID: _____		Tax Map ID: _____	
	Parcel Size: _____		Parcel Size: _____	
	Subdivision Lot #: _____		Subdivision Lot #: _____	
	E&S Plan Designer: _____			
	Phone: _____			

<p>Land-Disturbance Description (Briefly describe project specifics with estimated amount of land-disturbance)</p>	
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VA Responsible Land Disturber	Name: _____ RLD#: _____
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Licensed Contractor Information	Excavation Contractor Name: _____ VA State License #: _____ Exp. Date: _____ Class: _____ Contractor Mailing Address: _____ City/State/Zip: _____ Phone: _____ Email: _____
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I hereby certify that I am the owner of record of the property described herein, or that the proposed work has been authorized by the owner of the record and that I have been authorized to make this application as their designated agent. I agree to conform to all applicable state and local regulations, rules, and policies and such that shall be deemed a condition of entering into the exercise of the permit. In addition, if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the areas described herein at any reasonable hour for the purpose of enforcing the provisions of the applicable code(s), laws, and regulations.

Applicant Signature: _____ **Date:** _____

<p>OFFICE USE ONLY</p> <p>Date Received: _____</p> <p>Received by: _____</p> <p>Tax Ticket Review:</p> <p><input type="radio"/> Paid</p> <p><input type="radio"/> Unpaid</p> <p>Permit #: _____</p>	<p>Notes:</p>
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