



714 Lacey Road, Forked River, NJ 08731 Tel (609) 971-7002 Fax (609) 971-3391

www.SoilDistrict.org

For District Use Only

Application Number

SUBMIT WITH TWO (2) PLOT PLANS AND FEE OF \$700 PAYABLE TO O.C.S.C.D.

APPLICATION FOR SOIL EROSION AND SEDIMENT CONTROL PLAN CERTIFICATION

The enclosed soil erosion and sediment control plan and supporting information are submitted for certification pursuant to the Soil Erosion and Sediment Control Act, Chapter 251, P.L. 1975 as amended (NJSA 4:24-39 et. seq.) An application for certification of a soil erosion and sediment control plan shall include the items listed on the reverse side of this form.

Name of Project		Project Location: Municipality	
Project Street Address		Block	Lot
Project Owner(s) Name		Phone # Fax #	
Project Owner(s) Street Address (No P.O. Box Numbers)		City	State Zip
Total Area of Project (Acres)	Total Area or Land to be Disturbed (Acres)	No. Dwelling or other Units	Fee \$
Plans Prepared by*		Phone # Fax #	
Street Address		City	State Zip

Engineering related items of the Soil Erosion and Sediment Control Plan MUST be prepared by or under the direction of and be sealed by a Professional Engineer or Architect licensed in the State of New Jersey, in accordance with NJAC 13:27-6.1 et. seq.)

Agent Responsible During Construction			
Street Address			
City	State	Zip	Phone Fax #

The applicant hereby certifies that all soil erosion and sediment control measures are designed in accordance with current Standards for Soil Erosion and Sediment Control in New Jersey and will be installed in accordance with those Standards and the plan as approved by the Soil Conservation District and agrees as follows:

- To notify the District in writing at least 48 hours in advance of any land disturbance activity. Failure to provide such notification may result in additional inspection fees.
- To notify the District upon completion of the Project (Note: No certificate of occupancy can be granted until a report of compliance is issued by the District.
- To maintain a copy of the certified plan on the project site during construction.
- To allow District agents to go upon project lands for inspection.
- That any conveyance of this project or portion thereof prior to its completion will transfer full responsibility for compliance with the certified plan to any subsequent owners.
- To comply with all terms and conditions of this application and certified plan including payment of all fees prescribed by the district fee schedule hereby incorporated by reference.

The applicant hereby acknowledges that structural measures contained in the Soil Erosion and Sediment Control Plan are reviewed for adequacy to reduce offsite soil erosion and sedimentation and not for adequacy of structural design. The applicant shall retain full responsibility for any damages which may result from any construction activity notwithstanding district certification of the subject soil erosion and sediment control plan. It is understood that approval of the plan submitted with this application shall be valid only for the duration of the initial project approval granted by the municipality. All municipal renewals of this project will require submission and approval by the district. In no case shall the approval extend beyond three and one half years at which time resubmission and certification will be required. Soil Erosion and Sediment Control Plan certification is limited to the controls specified in the plan. It is not authorization to engage in the proposed land use unless such use has been previously approved by the municipality or other controlling agency.

1. Applicant Certification* _____ Signature Date _____ Applicant Name (Print)	3. Plan determined complete: _____ Signature of District Official Date _____ Signature of District Official Date
2. Receipt of fee, plan and supporting documents is hereby acknowledged: _____ Signature of District Official Date	4. Plan certified, denied or other actions noted above. Special Remarks: _____ Signature of District Official Date

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

SSCC251 API0 4/99

APPLICATION IS TO BE SIGNED BY PROJECT OWNER

STANDARD NOTES
SOIL EROSION AND SEDIMENT CONTROL

Rev.09/07

Projects that require site improvements beyond the construction of dwelling unit(s), such as street or drainage improvements or excessive land grading, shall NOT use this form.

SCD# _____ (to be assigned) MUNICIPALITY _____

BLOCK(S) _____ LOT(S) _____

PROJECT STREET ADDRESS _____

CONSTRUCTION SCHEDULE:

1. Clearing of lot(s).
2. **Installation of stone pad(s) and silt fence along paved street(s).**
3. Construction of dwelling unit(s).
4. Final grading of lot(s).
5. Permanent stabilization of lot(s).

STABILIZATION NOTES: (rates are all per 1,000 square feet).

- Prepare seedbed. All debris must be removed from topsoil before work is performed.
- Apply ninety (90) pounds ground limestone.
- Apply eleven (11) pounds 10-20-10 fertilizer.
- Apply seed using one of the seeding mixtures below. All seed must be incorporated or raked into the soil.
- Apply ninety (90) pounds mulch; mulch with grain straw or salt hay only.
- All mulch **MUST** be properly tacked (anchored).

NOTE: At the time of your final inspection, you are required to present evidence that the proper type and amount of materials (seed, lime and fertilizer) have been used for permanent stabilization work.

SEEDING MIXTURES FOR HOME LAWNS: (All seed must be incorporated or raked into the soil).

	<u>Plant Species</u>		<u>Seeding Rate (Pounds per 1,000 square feet)</u>
MIX #1	Tall fescue (turf-type)	93%	6.5
	Perennial ryegrass	7%	<u>0.5</u>
		Total	7.0 pounds per 1,000 square feet
MIX #2	Tall fescue (turf-type)	45%	2.0
	Creeping red fescue	22%	1.0
	Chewings fescue	22%	1.0
	Perennial ryegrass	11%	<u>0.5</u>
		Total	4.5 pounds per 1,000 square feet

At the time of application for a construction permit, the applicant/owner of each lot shall submit two (2) sealed plot plans to the Ocean County Soil Conservation District for review and approval.

APPLICANT'S NAME (PRINT) _____ PHONE _____

CELL _____

FAX _____

APPLICANT'S SIGNATURE _____ DATE _____

CURRENT MAILING ADDRESS _____