

Cecil Soil Conservation District

105 Chesapeake Blvd., Suite B-3
Elkton, MD 21921

Phone: 410-398-4411, ext. 3

Fax: 410-392-6530

Application for Erosion and Sediment Control Plan Review

Date and Time Submitted to the District: _____ Application Fee: _____

Plan submitted for: Initial Review 1st Revision *2nd Revision *3rd Revision
*Additional Fee Due

Project Name: _____ **Disturbed Acres:** _____
Tax map _____ Parcel _____ Lot _____ ADC Map Coordinates: Map _____ Grid _____

Proposed Development Type:

Residential Agricultural Industrial/Commercial Mining/Landfill
 Other(Specify): _____

Type of Plan Submitted:

Engineered Plan Standard Plan Forest Harvest Plan Basin Review
 Revision to Previously Approved Plan Restamp

Owner (Company Name): _____

Contact Name: _____ Phone: _____
Mailing Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact E-mail Address: _____

Developer (Company Name): _____

Contact Name: _____ Phone: _____
Mailing Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact E-mail Address: _____

Engineering Firm (Company Name): _____

Contact Name: _____ Phone: _____
Mailing Address: _____ Fax: _____
City: _____ State: _____ Zip: _____
Contact E-mail Address: _____

Other approvals required

General Waterway Construction Permit Joint Federal/State Permite
 Notice of Intent (NOI) (Provide copy of application)
 Small pond approval Other (Specify): _____

Expedited Review Requested (Attach letter explaining the need for expedited review)

All plans submitted to the District must be no larger than 24" x 36", must be folded (with the District and NRCS signature blocks visible) and accompanied by this application form. The application fee is due with the initial plan submitted. Checks should be made payable to the Cecil Soil Conservation District.

All plans submitted for District approval must have original signatures in the Owner and Engineer Certifications. The certifications must be signed in either blue or red ink.

For District Use Only

Date and time plan received by District: _____ Plan approved for expedited review: _____
 Application Fee rec'd Review Fee: _____