

CITY OF LEBANON, MISSOURI
MS4 DISCHARGE PERMIT
APPLICATION FOR LAND DISTURBANCE PERMIT
City of Lebanon – Ordinance No. 4642

THIS FORM MUST BE SUBMITTED WITH THE MAP OF AREA FOR APPROVAL OF LOCAL AUTHORITY. UPON APPROVAL BY THE CITY OF LEBANON, THIS FORM, ITS ATTACHMENTS, AND THE CONDITIONS OF PERMIT SHALL BECOME THE PERMIT TO DISCHARGE FROM THE FACILITY AND ACTIVITIES DESCRIBED BELOW.

1.00 DATE LAND DISTURBANCE ACTIVITY IS TO BEGIN (MO/DAY/YEAR)

2.00 a. This facility is now in operation under City of Lebanon Operating Permit Number LEB - _____
OR b. This is a new permit: City of Lebanon Operating Permit Number (NPDES) MO - _____

3.00 OWNER

NAME	EMAIL ADDRESS	PHONE
		FAX

ADDRESS STREET CITY STATE ZIP CODE

4.00 FACILITY

NAME

ADDRESS STREET CITY STATE ZIP CODE

5.00 CONTINUING AUTHORITY

NAME	PHONE
	FAX

ADDRESS STREET CITY STATE ZIP CODE

6.00 FACILITY CONTACT

NAME	TITLE	PHONE
	EMAIL ADDRESS	FAX

7.00 TOTAL AREA OF LAND TO BE DISTURBED (ACRES)

8.00 WILL A SEDIMENT BASIN BE CONSTRUCTED? YES NO (SEE CONDITION 8.H. OF GENERAL PERMIT MO-R101)

9.00 FOR EACH OUTFALL GIVE THE LEGAL DESCRIPTION (ATTACH ADDITIONAL SHEETS AS NECESSARY)

Outfall Number _____ 1/4 _____ 1/4 Sec _____ T _____ R _____ County
Outfall Number _____ 1/4 _____ 1/4 Sec _____ T _____ R _____ County
Outfall Number _____ 1/4 _____ 1/4 Sec _____ T _____ R _____ County

<p>9.10 FOR EACH OUTFALL LIST THE NAME OF THE RECEIVING WATER</p> <p>Outfall Number _____ Receiving Water _____</p> <p>Outfall Number _____ Receiving Water _____</p> <p>Outfall Number _____ Receiving Water _____</p>	
MO 780-1829 (6-04) MO 780-1829 (6-04)	
<p>9.20 BRIEFLY DESCRIBE THE NATURE OF YOUR BUSINESS</p>	
<p>9.30 ATTACH A USGS 1" = 2000' SCALE MAP SHOWING THE LOCATION OF THE FACILITY IN RELATION TO THE LOCAL ROAD SYSTEM. INDICATE ON THE MAP THE FACILITY; THE RECEIVING STREAM; THE POINTS OF DISCHARGE; AND THE MAP SECTION, TOWNSHIP AND RANGE.</p>	
<p>10.00 A CITY OF LEBANON APPROVED EROSION CONTROL PLAN IS ADMINISTERED IN THE CITY IN WHICH THE LAND DISTURBANCE IS OCCURRING. EROSION CONTROL PLAN ATTACHED.</p>	
<p>11.00 A STORM WATER POLLUTION PREVENTION PLAN (SWPPP) MUST BE DEVELOPED FOR THIS SITE. THIS PLAN MUST BE DEVELOPED IN ACCORDANCE WITH REQUIREMENTS & GUIDELINES SPECIFIED WITHIN THE GENERAL PERMIT FOR STORM WATER DISCHARGES FROM LAND DISTURBANCE ACTIVITIES. THIS APPLICATION WILL BE CONSIDERED INCOMPLETE IF THE SWPPP HAS NOT BEEN DEVELOPED. PLEASE ENCLOSE A COPY OF THE PLAN.</p> <p>BY SIGNING THIS FORM, THE APPLICANT AGREES THAT A SWPPP HAS BEEN DEVELOPED FOR THIS ACTIVITY.</p>	
<p>12.00 THE ACTIVITIES APPROVED UNDER THIS PERMIT MUST BE CONDUCTED IN ACCORDANCE WITH THE LOCAL EROSION CONTROL PLAN ADMINISTERED BY THE CITY OF LEBANON AND IN ACCORDANCE WITH THE STORM WATER POLLUTION PREVENTION PLAN (SWPPP) DEVELOPED BY THE APPLICANT.</p>	
<p>13.00 APPLICANT STATEMENT: I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THE APPLICATION, THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE, COMPLETE AND ACCURATE, AND BEING GRANTED THIS PERMIT, I AGREE TO ABIDE BY THE MISSOURI CLEAN WATER LAW AND ALL RULES, REGULATIONS, ORDERS AND DECISIONS, AS WELL AS ORDINANCES, RULES AND REGULATIONS OF THE CITY OF LEBANON, AND TERMS OF THIS PERMIT, SUBJECT TO ANY LEGITIMATE APPEAL AVAILABLE TO AN APPLICANT.</p>	
NAME AND OFFICIAL TITLE OF APPLICANT	APPROVED: DEPARTMENT SIGNATOR (NAME/TITLE)
TELEPHONE NUMBER ()	TELEPHONE NUMBER ()
SIGNATURE	SIGNATURE
DATE SIGNED	DATE SIGNED