



**COUNTY OF HALIFAX
E & S CONTROL APPLICATION**

1050 Mary Bethune Street
P. O. Box 699, Halifax, VA 24558
Phone: (434)476-3300 Fax: (434)476-3384
Completed applications may be
emailed to

Linda Younger Nancy Kamp
lfy@co.halifax.va.us OR ntk@co.halifax.va.us

APPROVED

Zoning: _____

Application: _____

Permit No: _____

Owner's Name: _____ Date: _____

Mailing Address: _____ Phone: (_____) _____

City: _____ State: _____ Zip: _____

Address of Project Site: (911 if available) _____

Directions to Project Site from Town of Halifax: _____

PROJECT INFORMATION:

Plan Prepared by: _____ Project Start Date: _____ Completion Date: _____

Project Name: _____ Project E & S Cost: _____

Tax Map (PRN) #: _____ Zoning: _____ Election District: _____ Conditional Use (Y/N): _____

Total Site Area (sq. ft. or acres): _____ Total Disturbed Area (sq. ft. or acres): _____

IDENTIFICATION OF RESPONSIBLE LAND DISTURBER:

Name: _____ Phone: _____

RLD Certificate Number: _____ Certificate Expiration Date: _____

******PLEASE SUBMIT A COPY OF THE RLD LICENSE WITH THIS APPLICATION ALONG WITH PLANS FOR REVIEW ---- TWO (2) SETS (Minimum) ******

*******NO WORK MAY BEGIN UNTIL THE APPROVAL OF PLANS, POSTING OF PERFORMANCE BOND, and PAYMENT OF PERMIT IS RECEIVED*******

I, hereby certify that I fully understand the provisions of the Erosion & Sediment Control Ordinance and that I accept responsibility for carrying out the Erosion & Sediment Control Plan for the above-referenced project(s) as approved by Halifax County. Additionally, I understand that any alterations from the approved plan(s) must be submitted and approved by the County.

I further grant the right-of-way entry onto this property, as described above, to the designated personnel of the County of Halifax for the purpose of inspecting and monitoring for compliance with the aforesaid Ordinance.

Printed Name: _____ Title: _____

Signature: _____ Date: _____