



Town of Waxhaw
Development Services Department
4218 Waxhaw-Marvin Rd. Waxhaw, NC 28173
704-843-2195 (Phone) | 704-843-2196 (Fax)

Date Received
Permit Fee
Permit Number

FINANCIAL RESPONSIBILITY/OWNERSHIP FORM
SEDIMENTATION POLLUTION CONTROL ACT

No person may initiate any land-disturbing activity on one or more acres as covered by Chapter 9, Section 9.2 of the Town of Waxhaw Land Development Code. No sedimentation and erosion control plan will be reviewed without submission of the completed form, an associated erosion and sedimentation plan and the appropriate fee. Submit the completed form, associated erosion and sedimentation plan to the Town of Waxhaw Engineering Department, Attn: Sedimentation and Erosion Control Inspector, along with the appropriate fee. (Please type or print and, if the question is not applicable or the e-mail address or phone number is unavailable, place N/A in the blank.)

Part A.

Project Name: _____

Location of land disturbing activity: _____

Latitude (decimal degrees): _____ Longitude (decimal degrees): _____

Approximate date land disturbing activity will commence: _____

Address/Location of Property: _____

Purpose of development (residential, commercial, industrial, etc.): _____

R-1 ____ R-3 ____ NC ____ MS ____ TC ____ CC ____ EC ____ CZ-MU ____

Total acreage disturbed or uncovered (including off-site borrow and waste areas). _____

Parcel Number(s):

Fees

\$500.00 application fee for 1st acre: \$ _____

\$100.00 per additional acre (rounded up to the next acre) \$ _____

(Example: 21-acre site - \$500.00+\$2,000.00)

10% technology review fee \$ _____

(Example: 21-acre site - \$500.00+\$2,000.00+\$250.00)

Total Fees \$ _____

Has an erosion and sediment control plan been filed?

Yes

Enclosed:

Person to contact should erosion and sediment control issues arise during land-disturbing activity.

Name

Email Address

Phone: Office #

Mobile #

Landowner(s) of Record (attach accompanied pages to list additional owners):

Name

Office Phone

Mobile Phone

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Deed Book No. _____

Page No. _____

Provide a copy of the most current deed.

Are deeds in applicant's name?

Yes

No

If no, attach Registered Agent Form

Part B.

1.

Company(ies) who are financially responsible for the land disturbing activity (Provide a comprehensive list of all responsible parties on accompanying pages.) *If the company is a sole proprietorship or if the landowner(s) is an individual(s), the name(s) of the owner(s) may be listed as the financially responsible party(ies).*

Company Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Note: If the Financially Responsible Party is not the owner of the land to be disturbed, include with this form the landowner's signed and dated written consent for the applicant to submit a draft erosion and sedimentation control plan and to conduct the anticipated land disturbing activity.

2. a) If the Financially Responsible Party is a domestic company registered on the NC Secretary of State business registry, give name and street address of the Registered Agent.

Name of Registered Agent

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Name of Individual to Contact (if Registered Agent is a company)

2. b) If the Financially Responsible Party is not a resident of North Carolina, give name and street address of the designated North Carolina agent who is registered on the NC Secretary of State business registry.

Name of Registered Agent

Email Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Name of Individual to Contact (if Registered Agent is a company)

c) If the financially Responsible Party is engaging in business under an assumed name, give name under which the company is *Doing Business As (DBA)* . If the Financially Responsible Party is an individual, General Partnership, or other company not registered and doing business under an assumed name, **attach a copy of the Certificate of Assumed Name.**

Company DBA Name

The above information is true and correct to the best of my knowledge and belief and was provided by me under oath. (This form must be signed by the Financially Responsible Person if an individual(s) or his attorney-in-fact, or if not an individual, by an officer, director, partner, or registered agent with the authority to execute instruments for the Financially Responsible Party.) I agree to provide corrected information should there be any change in the information provided herein.

Type or Print Name

Title or Authority

Signature

Date

I, _____ a Notary Public of the County of _____

State of North Carolina, hereby certify that _____ appeared personally before me this day and being duly sworn acknowledged that the above form was executed by him/her.

Witness my hand and notarial seal, this _____ day of _____, 20_____

Seal

Notary

My commission expires _____

Continued from Items 9 & 10 in Part A of the Financial Responsibility/Ownership Form for multiple owners. Attach copies of this page as needed to list all landowners.

Landowner 2 of Record

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Deed Book No. _____

Page No. _____

Provide a copy of the most current deed.

Landowner 3 of Record

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Deed Book No. _____

Page No. _____

Provide a copy of the most current deed.

Landowner 4 of Record

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Deed Book No. _____

Page No. _____

Provide a copy of the most current deed.

Landowner 5 of Record

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Deed Book No. _____ Page No. _____ Provide a copy of the most current deed.

Continued from Items 1 in Part B of the Financial Responsibility/Ownership Form for multiple parties.
Attach copies of this page as needed to list all financially responsible parties.

Company 2

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Company 3

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Company 4

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone

Company 5

Name

Email Address

Current Mailing Address

Current Street Address

City, State, Zip

City, State, Zip

Office Phone

Mobile Phone