



# EROSION AND SEDIMENT CONTROL PERMIT

Town of Corte Madera, Department of Public Works  
 300 Tamalpais Drive, Corte Madera, CA 94925  
[pwcounter@tcmmail.org](mailto:pwcounter@tcmmail.org) | [www.townofcortemadera.org](http://www.townofcortemadera.org)  
 Phone: (415) 927-5057 | Fax: (415) 927-5039

_____
<b>PERMIT NUMBER</b>

## APPLICATION SECTION

<b>Site Address:</b>		<b>Assessor's Parcel Number (APN):</b>	
<b>APPLICANT</b>		<b>CONTRACTOR</b>	
<b>Name:</b>		<b>Company Name:</b>	
<b>Street Address:</b>		<b>Street Address:</b>	
<b>City / State / Zip:</b>		<b>City / State / Zip:</b>	
<b>Phone:</b>	<b>Cell:</b>	<b>Contact Name:</b>	
<b>Email:</b>		<b>Phone:</b>	<b>Cell:</b>
<b>PROPERTY OWNER (if different from Applicant):</b>		<b>State Lic. #</b>	<b>Town Bus. Lic. #</b>
<b>Name:</b>			
<b>Phone:</b>		<b>License Classifications:</b>	
<b>Description of Work / Surface Improvement:</b>			<b>Estimated Surface Area in Square Feet:</b>
<b>Start Date:</b>	<b>Completion Date:</b>	<b>Plan Review #:</b>	

Print Name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Applicant is:  Owner  Agent  Contractor

## APPROVAL SECTION

In compliance with this application and subject to all of the terms, conditions, and restrictions written below, all applicable sections of the Corte Madera Municipal Code, and in accordance with approved plans subject to the following revisions and conditions:

<input type="checkbox"/> Erosion and Sediment Control Plan required (3 copies) <input type="checkbox"/> All excavation is to be on owner's property. <input type="checkbox"/> No sediment is to reach the street or adjacent property. <input type="checkbox"/> Excavation to be covered after work hours. <input type="checkbox"/> The Permittee shall provide for proper drainage if the work shall interfere with the established drainage pattern. <input type="checkbox"/> Other: _____	<input type="checkbox"/> All erosion and sediment control provisions shall comply with the latest edition of ABAG Manual of Standards for Erosion and Sediment Control Measures. <input type="checkbox"/> All disturbed soil shall be completely covered with erosion control measures. <input type="checkbox"/> Security amounting to \$_____.
---	---

The **Applicant's Project Engineer** shall inspect all erosion and sediment control measures after every storm event and appropriate modifications shall be made as necessary to maintain effective erosion and sediment control at the site.

<b>PERMIT APPROVED AND ISSUED</b>
By: _____ Public Works Representative
Date Issued: _____
Permit Expiration: _____

<b>INSPECTION NOTES</b>
Inspected by: _____ Date: _____
Notes/Corrections: _____

<b>FINAL INSPECTION</b>
By: _____ Public Works Representative
Date: _____

<b>FEE SUMMARY</b>	
<u>Surface Improvement</u>	
1. Less than 1,000sf (\$325)	\$ _____
2. 1,000sf to less than 5,000sf (\$550)	\$ _____
<u>Greater than 5,000sf</u>	
3. 5,000sf-10,000sf (Deposit \$1,500)**	\$ _____
4. Greater than 10,000sf (Deposit \$2,500)**	\$ _____
5. Security – Refundable – \$800 min. up to 75¢/sf for areas greater than 5,000sf	\$ _____
6. Other: _____	\$ _____
Total Fees/Deposits \$ _____	
Date: _____ Receipt # _____ Ck/MC/V # _____	
* Initial deposit amount only. Any remainder will be refunded; additional staff time will be billed per Hourly Rate Schedule. * Enter into Cost Based Fee Agreement.	