

**CITY OF BLUEFIELD, WV
STORMWATER PERMIT APPLICATION**

200 Rogers St, Bluefield, WV 24701 | Stormwater Director, Kerry Stauffer: (304)-327-2401*2461

PERMIT INFORMATION (Please Print Clearly or Type) :					
Applicant Name:			Street Address:		
City:		State		Zip:	
Phone (Home):		Phone (Office):		Phone (Cell):	
E-Mail Address:					
1. PROJECT INFORMATION:					
<input type="checkbox"/> Single Family Dwelling	<input type="checkbox"/> Other (multifamily, Comm., Industrial, Parking, Etc.)	<input type="checkbox"/> Site Plan Attached	<input type="checkbox"/> Stormwater Management Plan Attached	<input type="checkbox"/> Erosion and Sediment Control Plan Attached	
2. TYPE OF CONSTRUCTION:					
<input type="checkbox"/> House	<input type="checkbox"/> Multifamily	<input type="checkbox"/> Comm. / Indust.	<input type="checkbox"/> Parking	<input type="checkbox"/> Other (Explain in 7)	
3. PROJECT ADDRESS:					
Street Address:		City:		State:	Zip:
4. LOT SURFACE COMPOSITION:					
A. Pre Pervious: Sq. Ft.		B. Post Pervious: Sq. Ft.		C. Post Impervious: Sq. Ft.	
D. Pre Impervious: Sq. Ft.		E. Total Site Area: Sq. Ft.		F. Percent Impervious: %	
* ALL GRAVEL SUBJECT TO VEHICLE TRAFFIC SHALL BE CONSIDERED IMPERVIOUS.					
5. CONTRACTOR INFORMATION:					
Contractor:			Site Representative:		
Street Address:					
City:		State:		Zip:	
Phone (Office):		Phone (Cell):			
E-Mail Address:					
6. DEP Approval Required: 1-3 Acres – Notice of Intent; 3+ Acres – WVDEP Construction Stormwater Permit					
Yes or No?:		If Yes, then provided copy?:			
7. ADDITIONAL INFORMATION ABOUT PROJECT (Please Explain in detail) :					
Printed Name:		Signature:		Date:	
PROJECT EVALUATION (For Office Use Only) :					
PROJECT REQUIREMENTS:					
<input type="checkbox"/> Erosion & Sediment Control		<input type="checkbox"/> Stormwater Management Plan		<input type="checkbox"/> Other (See Comments)	
ROOF DRAINS/DISCHARGE PIPE SHALL CONNECT TO:					
<input type="checkbox"/> Ext. Storm Line	<input type="checkbox"/> Dry Well	<input type="checkbox"/> Ditch	<input type="checkbox"/> Stream	<input type="checkbox"/> Ground	<input type="checkbox"/> Other (See Comments)
WATERSHED INFORMATION					
Receiving Stream:			Impairment or TMDL:		
COMMENTS:					
Service #:		Permit #:		Date Received:	
Reviewed By:			Date Reviewed:		