

Charter Township of Garfield 3848 Veterans Drive, Traverse City, MI. 49684 Phone: (231)941-1620 Fax: (231)941-1588

PERMIT TRANSFER NOTIFICATION OF EXISTING SOIL EROSION AND SEDIMENTATION CONTROL (SESC) PERMIT

Pursuant to Section 9112 of Part 91, SESC, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, this form must be completed by the property transferor, signed by the transferor/and transferee, and submitted to the county or municipal enforcing agency before the property is transferred.

Perspective Landowr	ner(s):	
Name(s):		
Address:		
SUBJECT: SESC Per	mit No.	Parcel identification No.
Environmental Protecti property being purchas permit issued by Garfie (231)941-1620. Upon t permit will be transferre	ion Act, 1994 PA 451, as sed is currently subject to eld Township Building/Zo transfer of the title of the	(Part 91), of the Natural Resources and a amended (NREPA), please be advised that the orequirements in the above-referenced SESC oning Department, 3848 Veterans Dr. Traverse City, property to the new owner's name(s), the SESC name(s). A copy of the existing permit and ion.
property is transferred compliance with all SE any violations of the transferred. Copies of of Garfield and/or the New owner's information	into the new owner's na SC permit obligations ar permit on the transferre all notices of violations Michigan Department of on. Also, please be advise-referenced permit are	NREPA, please be advised that when the title to the me(s), the new owner <u>assumes responsibility</u> for nd conditions, including plan requirements, and for and parcel that exist on the date the parcel is and/or legal actions taken by the Charter Township Environmental Quality (MDEQ) are enclosed for the sed that if the earth change or SESC measures altered or modified, a revised plan and permit
buyer shall sign this no	otice and the owner/pern	112(5) the owner/permittee and the prospective nittee shall submit the signed notice to the Garfield with \$50.00 Permit Transfer Fee prior to the property
obtained (check appropriate of the NRE (Authorization No. reflect new ownership be advised that a copy included with the requestion of the NRE (Authorization No. reflect new ownership).	ppriate box) pursuant to PA (Permit-by-Rule), fro) for this property, a w must be made to the ME of the SESC permit and est. Requests must be s	ater from this property has or has not been or R 323.2190 under Part 31, Water Resources on the MDEQ. If authorization was granted written request to have the authorization changed to DEQ at the time the property is transferred. Please of plan that reflects the new ownership must be submitted to the MDEQ, Water Resources Division, for North, P.O. Box 30657, Lansing, Michigan 48909.

Please be further advised that landowners with an existing earth change disturbing one to less than five acres of soil, with a point source discharge to the waters of the state, have automatic authorization to discharge storm water under Permit-by-Rule. Notification to the MDEQ of the proposed ownership transfer for these automatic authorizations is <u>not</u> necessary.

It is anticipated that the transfer of ownership will occur on . Please acknowledge receipt of this notification and concurrence with the above-stated stipulations by having an authorized individual countersign below and return it to me, the owner/permittee, at the address below by . This signed document shall be submitted to the SESC permitting agency **ten (10) business days** prior to the transfer of the property.

Disclaimer: This document fulfills the notification requirement for transferring a SESC permit into a new owner's name pursuant to Part 91 and the reauthorization, if appropriate, to discharge storm water from the site. It does not address the notification or permit requirements that may exist for any other federal, state, or local permits that may be associated with the property.

Owner(s)/Permitte	ee(s):	
Name(s):		
	(Print)	(Signature)
	(Print)	(Signature)
Address:		
	_	(date)
Phone:		
Perspective Land	lowner(s)/Permittee(s):	
Name(s):		
	(Print)	(Signature)
	(Print)	(Signature)
Address:		
(if different from top of form)		(date)
Phone:		

Enclosures

This completed form shall be submitted to Garfield Township Building/Zoning office, 3848 Veterans Dr., Traverse City, MI. 49684.