

**APPLICATION FOR PERMIT TO CONSTRUCT
CITY OF GILLETTE**

1. **Name of Project** _____

2. **Location of Project** _____ ¼, _____ ¼, Sec _____, T _____N, R _____W.

General Physical Address: _____

3. **Does this project include:**

A. **Public water supply well?**

_____ Yes _____ No

B. **Potable water supply pumping station?**

_____ Yes _____ No

If yes, what is the design flow (GPM)? _____ GPM

C. **Potable water storage facility?**

_____ Yes _____ No

If yes, what is the size (GAL)? _____ Gallons

D. **Potable water mains?**

_____ Yes _____ No (_____ New _____ Replacement)

If yes, what is the additional peak day demand (GPD)? _____ GPD

E. **Sanitary sewage pumping station and force main?**

_____ Yes _____ No (_____ New _____ Replacement)

If yes, what is the design flow (GPM)? _____ GPM

F. **Sanitary sewage collection lines?**

_____ Yes _____ No (_____ New _____ Replacement)

If yes, what is the additional average daily volume (GPD)? _____ GPD

G. **Site Drainage?**

i. **Open Channels?**

_____ Yes _____ No (_____ New _____ Replacement)

i. **Storm Drains?**

_____ Yes _____ No (_____ New _____ Replacement)

iii. **Culverts/Hydraulic Structures?**

_____ Yes _____ No (_____ New _____ Replacement)

iv. **Detention Ponds?**

_____ Yes _____ No (_____ New _____ Replacement)

v. **Water Quality Structures?**

_____ Yes _____ No (_____ New _____ Replacement)

H. Public Streets/sidewalks/approaches?

_____ Yes _____ No (_____ New _____ Replacement)

I. Earthwork/Overlot Grading

_____ Yes _____ No

Total area of disturbance _____ AC
Stormwater Permit Application Submitted _____ Yes _____ No
WYPDES Permit _____ Yes _____ No _____ NA

J. Drainage Report Completed?

_____ Yes _____ No

Title of Report: _____
Prepared by: _____

K. Water System Design Report Completed?

_____ Yes _____ No

Title of Report: _____
Prepared by: _____

L. Sewer System Design Report Completed?

_____ Yes _____ No

Title of Report: _____
Prepared by: _____

M. Traffic Impact Analysis Report Completed?

_____ Yes _____ No

Title of Report: _____
Prepared by: _____

N. Geotechnical Report Completed?

_____ Yes _____ No

Title of Report: _____
Prepared by: _____

O. Development in the Floodway/Flood Plain?

_____ Yes _____ No

If yes, describe the type of improvement proposed (within the Flood Plain):

And provide a description of the extent to which any watercourse will be altered or relocated as a result of the proposed development:

And provide certification by a registered professional engineer or architect that the criteria in City Code, Section 5-85(b) [§ 7-13(b)] SPECIFIC STANDARDS are met.

I certify that the above described facility has been submitted in accordance with local and state rules and regulations. I have authorized the following engineering and testing firm to act upon my behalf during the design and construction phases of the project. They are authorized on my behalf to receive and release correspondence regarding this project to the City of Gillette. If I fail to comply with the obligations stipulated within local and state rules and regulations, I hereby authorize the City of Gillette to act as necessary, and upon 20 day written notice, on my behalf, and at my expense, to mitigate any known violations such that they are in compliance with all local and state rules and regulations.

Name of Owner of the Project: _____

Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____ Home Phone: _____

Print Owner Name

Signature of Owner Date

Name of Engineering Firm: _____

Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____

Name of Professional Engineer _____

Engineer's P.E. Number _____

*Name of Testing Firm: _____

Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____

**If the Engineering Firm is responsible for quality control and testing on the project, write "same" on this line.*

Forms:Application for Permit to Construct

Utility Operator of the Project: _____

Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____ Home Phone: _____

Utility Operator Name

Signature of Operator Date