

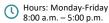
FINANCIAL RESPONSIBILITY/OWNERSHIP FORM SEDIMENTATION POLLUTION CONTROL ACT

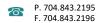
No person may initiate any land-disturbing activity on one or more acres as covered by Chapter 9, Section 9.2 of the Town of Waxhaw Land Development Code. No sedimentation and erosion control plan will be reviewed without submission of the completed form, an associated erosion and sedimentation plan 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.

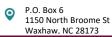
1.	Project Name					
2.	Location of land-disturbing activity: C	ounty	_ City or Towns	hip		
	Highway/Street	Latitude(decimal degrees)	Longitu	de(decimal degrees)		
3.	Approximate date land-disturbing acti	vity will commence:				
1.	Purpose of development (residential,	commercial, industrial, ins	titutional, etc.):_			
5.	Total acreage disturbed or uncovered	(including off-site borrow	and waste area	s):		
6.	Amount of fee enclosed: \$	part thereof (rounded up t nount. Checks are to be ee shown on the reference	o the next acre) made out to the	plus a 10% Technology Town of Waxhaw, with		
7.	Has an erosion and sediment control	plan been filed? Yes □	Enclosed \square	No 🗆		
3.	Person to contact should erosion and sediment control issues arise during land-disturbing activity:					
	Name	E-mail Address	S			
	Phone: Office #	Mobile #				
).	Landowner(s) of Record (attach accord	mpanied page to list additi	onal owners):			
	Name	Phone: Office	#	Mobile #		











	Current Mailing Add			Current 9	Street Address		
	Ourient Maning Add	11000		ounch c	meet Address		
	City	State	Zip	City	State		Zip
10.	Deed Book No		Page No		Provide a copy of	f the most cu	rrent deed.
Par	t B.						
1.		of all responsi	ble parties	on accomp	the land-disturbing panied page.) If the cony be listed as the financial	npany is a sole p	oroprietorshi _l
	Company Name			E-mail Ac	ldress		
	Current Mailing Address			Current Street Address			
	City	State	Zip	City	State		Zip
	Phone: Office #			Mobile # _			
the cor 2.	te: If the Financially Financial	nd dated writter uct the anticipat Responsible Par ve name and st	n consent for ed land dis ty is a dom	or the applica turbing activi estic compa	int to submit a draft er ity. ny registered on the N istered Agent:	osion and sec	dimentatior
	Current Mailing Addre	ess		Current S	Street Address		
	City	State	Zip	City		State	Zip
	Phone: Office #			Mobile #			
	Name of Individual	to Contact (if F	Registered	Agent is a	company)		

Name of Registere			E-mail Address			
Name of Negistere	su Agent		L-mail Address	•		
Current Mailing Ac	ddress		Current Street	Address		
City	State	Zip	City		State	Zip
Phone: Office # _			Mobile #			
Name of Individu	ual to Contact (if F	Registered	Agent is a comp	oany)		
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which the compan Partnership, or oth	ny is Doing Busines ner company not re of Assumed Nam	ss As. If th	e Financially Res	ponsible Party	is an individu	ual, Genera
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Continued from It owners. Attach co					nership Form fo	r multiple
Landowner 2 of Red	cord:					
Name			Phone: (Office #	Mobile #	
Current Mailir	ng Address		Current S	Street Address		
City	State	Zip	City	Sta	ate	Zip
Deed Book N	0	Page No		Provide a cop	by of the most curr	ent deed.
Landowner 3 of Red	cord:		Phone: 0	Office #	Mobile #	
Current Mailir	ng Address		Current S	Street Address		
City	State	Zip	City	Sta	ate	Zip
Deed Book N	0	Page No		Provide a cop	by of the most curr	ent deed.
Landowner 4 of Rec	cord:					
Name			Phone: (Office #	Mobile #	
Current Mailir	ng Address		Current S	Street Address		
City	State	Zip	City	Sta	ate	Zip
Deed Book N	0	Page No		Provide a cop	y of the most curr	ent deed.

downer 5 of Record:						
Name			Phone: Office	#	Mobile #	
Current Mailing Addr	ess		Current Street	Address		
City	State	Zip	City	State	Zip	
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Current Mailing Addr	ess		Current Street Address			
City	State	Zip	City	State	Zip	
Phone: Office #			Mobile #			
Company 3 Name			E-mail Addres	s		
Current Mailing Addr	ess		Current Street	Address		
City	State	Zip	City	State	Zip	
Phone: Office #			Mobile #			
Company 4 Name			E-mail Addres	s		
Current Mailing Addr	ess		Current Street	Address		
City	State	Zip	City	State	Zip	
Phone: Office #			Mobile #			

Current Mailing Address			E-mail Address			
			Current Street Address			
City State Zip			City	State	Zip	
Phone: Office	#		Mobile #			