



CITY OF PEVELY

301 Main Street
P.O. Box 358
Pevely, Missouri 63070
STORM WATER CONTROL PERMIT

Telephone: 314/479-4452
314/464-8000
Fax: 314/479-4116

PERMIT NUMBER _____

LOCATOR NUMBER _____

DATE _____

_____ (herein called "Applicant")
requests approval of Storm Water Control Plan for _____

_____, located at _____
(Business/Subdivision name) (Number, street)

between _____
(nearest intersecting streets)

Size of property _____ acres _____

Type of Development _____

Zoning District _____

Area Developed _____ Undeveloped _____ Total _____

Additional Information _____

Review Fee\$ _____ Paid _____ Unpaid _____

Bond or Escrow Required _____

(Applicant's Engineer) Signed _____ (Applicant)

(Address) (Address)

(Telephone Number) (Telephone Number)

Permit granted _____, 19_____
Public Works Director