

Certification of Completion & Compliance

CERTIFICATE OF COMPLETION & COMPLIANCE

Address of premises on which land alteration was accomplished: _____

Inspection Date(s): _____ Permit Number: _____

Relative to plans prepared by: _____ on _____

(date)

I hereby certify that:

1. I am familiar with drainage requirements applicable to such land alteration (as set forth in the Allen County Stormwater Management Ordinance); and
2. I (or a person under my direct supervision) have personally inspected the completed work and examined the drainage permit and its conditions, as-built plans, and final drainage calculations consistent with as-built conditions performed pursuant to the above referenced drainage permit; and
3. To the best of my knowledge, information, and belief, such land alteration has been performed and completed in conformity with all such drainage requirements, except _____

Signature: _____

Date: _____

Typed or Printed Name: _____

Phone: (____) _____

(SEAL)

Business Address: _____

SURVEYOR ENGINEER
(circle one)

Indiana Registration No. _____