TO:

Agencies with Critical Dune Areas in their Jurisdictions

FROM:

Water Resources Division

Michigan Department of Environmental Quality

DATE:

February 20, 2013

SUBJECT:

Notice of Application Received

File No. 13-61-0017-P

Enclosed for your information is an application for permit under consideration by the Michigan Department of Environmental Quality (MDEQ), Water Resources Division, for a project in a Critical Dune Area in accordance with Section 35304(1)(b), found in Part 353, Sand Dunes Protection and Management, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended.

If you would like additional information regarding this application, contact the local staff reviewer, Ms. Nancy Cuncannan, at 616-356-0209; cuncannann@michigan.gov; or MDEQ, WRD, Grand Rapids District Office, 350 Ottawa Avenue NW, Unit 10, Grand Rapids, Michigan 49503-2316.

All correspondence should reference File No. 13-61-0017-P.

#### Enclosure

cc: White River Township Clerk

Muskegon County Health Department

Muskegon County Clerk

Muskegon Conservation District Ms. Nancy Cuncannan, MDEQ

			RECEIVED	
> Previous USACE File	Number			DEQ File Number
USACE File Number		Date Received	CED i o anta	13-61-00/11
USACE File Number		6 5	FEB 1 3 2013	Fee received \$
<b>4</b>		oc	THE PROPERTY OF THE PARTY	1400.00
			ENVIRONMENTAL QUALITY AND A WATER MANAGEMENT	
			plication package. Fill out applica	ation and additional pages as needed.
All items in Sections 1 through	'			
Project-specific Sections 10 th Dimensions, volumes, and cal	_	•	maget areas	
	•		•	and identified attachments (♣) are included.
			white on 8 ½ by 11 inch paper; p	
Application fee is attached.	no, one set mac	t bo black and	winto on o 72 by 11 mon paper, p	niotographis.
	nation For Lati	tude, Longitud	e, and TRS info anywhere in Micl	higan see www.mcgi.state.mi.us/wetlands/
roject Address (road, if no stree	address)	Zip Code	Municipality	County
Ferry Stree!	,	.,,	(Township/Village/City)	Muskegon
		1	White River Twp	washington .
roperty Tax Identification Number	er(s)	Latitude		Township/Range/Section (TRS)
1-01-002-100-0005-00			<u>43.3848</u> N	T 11N N or S; R 18W E or W;
ubdivision/Plat and Lot Number		Longitude		Sec2
		1	86 4277 W	OR Private Claim #
Applicant and Agent In	formation	<del> </del>		
wner/Applicant (individual or co	porate name)		Agent/Contractor (firm nam	ne and contact person)
ro G Land Company c/o Bill G	-		Resource Planning & Des	-
lailing Address 4199 N. Lakesh			Mailing Address 105 W. Ex	
ity Holland State	e <i>M</i> // Zip	Code 49424	City Spring Lake	State MI Zip Code 49456
Contact Phone Number	Fax		Contact Phone Number	Fax
16-813-1726			616-638-5735	
mail			E-mail johnsonphilip@sb	cglobal.net
No ⊠ Yes Is the applicant the	ne sole owner o	f all property o		tructed and all property involved or impacted b
			perty owners including the owner	
roperty Owner's Name (If different	ent from applica	nt)	Mailing Address	281
ontact Phone Number			City	State Zip Code
Project Description				
roject Name Bro G Residence			Preapplication File Number	rP
ame of Water body Lake Michig	gan		Date project staked/flagged	1 02/01/13
ne proposed project is on, within	, or involves (ch	neck all that ap	ply)	Project Use
an inland lake (5 acres or more	∋)	🗌 a Great I	_ake or Section 10 Waters	⊠ private
a pond (less than 5 acres)		a wetland		commercial
] a stream, river, ditch or drain			ar floodplain	public/government project is receiving federal/state
a legally established County D	rain	☐ a dam	A 182 A 2-1	transportation funds
		IXI a degion:	ated high risk erosion area	Mottand Destaration
Date Drain was established			-	Wetland Restoration
Date Drain was established a channel/canal 500 feet of an existing water b		🛭 a designa	ated critical dune area ated environmental area	other

Construction Sequence and Methods Driveway construction shall occur first; driveway footprint shall be mechanically cleared; slope retention installed where proposed; driveway sub-base material installed; impacted areas stabilized with native vegetation; mechanically clear areas of house footprint, septic area and drive approach; excavate for foundations; install/backfill foundations; stabilize perimeter impacts; construct residence; install remaining drive approach; final surface all drive areas; plant impacted areas.

Written Summary of All Proposed Activities Construct a small readily-moveable single family residence, driveway, on-site sanitary septic

system and water well in accordance with attached plans

4 Project Purp	ose, Use and Alterna	itives Attach add	litional sheets as ne	ecessary.		
Describe the purpose	of the project and its inf	rended use; include:	any new development	or expansion of an existing land	d use.	
				ord owned by the applicant.		
project layout and des	sign, and construction te	chnologies. For utili	ity crossings include a	ctors such as, but to limited to, a lternative routes and construction	on methods.	
witnin trie existing z	e location has been sit 4' wide easement so a ze the footprint of the c	s to avoid impacts	s to all steep slopes, to steep slopes whe	the route of the 12' wide driv re possible; slope retention s	eway has been located hall be used where	
5 Locating You	r Project Site Attack	h a legible black a	nd white map with a	North arrow.		
lames of roads of clo	sest intersection Ferry	Street and Old Cha	annel Trail	****		
Directions from main Channel Trail North	ntersection to the project from Montague to Old	t site, with distances Channel Inn locate	s from the best and ne	arest visible landmark and wated old Channel Trail (nth end o	er body Follow Old  of driveway off Ferry St)	
Description of building	gs on the site (color; 1 or	2 story, other)	•	jacent landmarks or buildings (a		
fow can your site be	identified if there is no vi	sible address? Feri	ry St. ROW ends at L	adjacent to Nth end of propo ake Michigan; driveway off st	h side of ROW	
Easements ar	nd Other Permits				I TO THE WINDOW NEWS	
<del></del>		cent or other eacons	ont doed contriction to	ease, or other encumbrance upo		
If yes, attach a cop	y. Provide copies of cou	urt orders and legal	lake levels if applicabl	e.	on the property?	
ist all other federal, in	nterstate, state, or local	agency authorization	ns including required a	ssurances for Critical Dune Are	a projects	
Agency	Type of Approval	Number	Date Applied	Date approved /denied	Reason for denial	
lusk DPW	Part 91			12/10/12		
	Septic/well	8394/1456		12/17/12		
	- 36000 11011	CD Assurance 01/16/08				
ICD		L		01/16/08		
ICD				01/16/08		
Compliance		n? (M/D/Y) ASAP	Propo	01/16/08 sed completion date (M/D/Y) 1	2/31/13	
Compliance a permit is issued, w	Assurance			sed completion date (M/D/Y) 1	2/31/13	
CD Compliance a permit is issued, w No Yes Has a	Assurance Then will the activity beginny construction activity of	commenced or been	completed in a regula	sed completion date (M/D/Y) 1	Harry Total Control of House	
CO Compliance a permit is issued, was a lif Yes, identify the party of	Assurance when will the activity beging construction activity contion(s) underway or contion regulated activities continued to the regulated activities continued to the regulated activities of the regulated activities	commenced or been ompleted on drawing	completed in a regula s or attach project sp	sed completion date (M/D/Y) 1 ated area? acifications and give completion	Harry Services	
Compliance a permit is issued, w No Yes Has a If Yes, identify the p No Yes Were t If Yes, list the permit	then will the activity beginny construction activity contion(s) underway or contient engulated activities on the regulated activities on the numbers	commenced or been ompleted on drawing onducted under a DR	completed in a regula s or attach project spe EQ and/or USACE pe	sed completion date (M/D/Y) 1 ated area? ecifications and give completion mit?	I.a.	
CO Compliance a permit is issued, was No Yes Has a If Yes, identify the part No Yes Were to If Yes, list the permit No Yes Are yes	Assurance  Then will the activity beginny construction activity contion(s) underway or contion(s) underway or continuous activities on the regulated activities of the regulated activities on the regulated activities of the reg	commenced or been ompleted on drawing onducted under a DR	completed in a regula s or attach project spe EQ and/or USACE pe	sed completion date (M/D/Y) 1 ated area? acifications and give completion	Harry Town Stellings Stellings	
Compliance  a permit is issued, was a lif Yes, identify the parmit is issued.  No Yes Has a lif Yes, identify the parmit is issued.  Yes Has a lif Yes, identify the permit is issued.  If Yes, identify the permit is incompliant.	Assurance  Then will the activity beging construction activity of cortion(s) underway or continuous activities on the regulated activities on the regulated activities on the activities on aware of any unresolution.	commenced or been ompleted on drawing onducted under a Di- aved violations of env	completed in a regulars or attach project specific and/or USACE pe	sed completion date (M/D/Y) 1 ated area? ecifications and give completion mit? ation involving the property?	date(s).	
f a permit is issued, w  No ☐ Yes Has a  If Yes, identify the p  No ☐ Yes Were t  If Yes, list the permit	Assurance  Then will the activity beginny construction activity control (s) underway or control (s) un	commenced or been ompleted on drawing onducted under a Divided violations of environment mailing	completed in a regulars or attach project specific and/or USACE pe	sed completion date (M/D/Y) 1 ated area? ecifications and give completion mit?	date(s).	

List all adjacents. If you own the adjacent lot, provide the requested information for the first adjacent parcel that is not owned by you.

Read carefully before signing.

Mailing Address

6675 Lau Rd

7386 Post Rd

☐ Lake Association

Cynthia Kiel Trust

Property Owner's Name

Township of White River

**Applicant's Certification** 

RECEIVED

State and Zip Code

MI 49437

MI 49437

City

Montague

Montague

FEB 1 2 2013

## U.S. Army Corps of Engineers www.lre.usace.army.mil Michigan Department of Environmental Quality www.mi.gov/jointpermit

#### Critical Dune Areas and High Risk Erosion Areas (See Sample Drawings 19 and 20)

#### Critical Dune Areas (See Sample Drawing 20)

- Although not required, submitting PHOTOGRAPHS of the site may provide for a faster application review.
- For more information go to www.mi.gov/jointpermit, select "Sand Dune Protection" under "Related Links."
- All property boundaries and proposed structure corners, including decks, septic systems, water wells, driveways, grading, and terrain alteration locations must be staked before the WRD site inspection.
- Scaled overhead and cross-section plans must include all property boundaries, locations, and dimensions of all existing structures and impacted areas, and all proposed structures, terrain alterations, and construction access. Cross-sections must show existing and proposed grades, including foundations.
- · Construction in critical dune areas on slopes greater than 33 percent (1 vertical: 3 horizontal) is prohibited without a special exception.
- Construction in critical dune areas on slopes that measure from 25 percent (1 vertical: 4 horizontal) to less than 33 percent requires sealed plans prepared by a registered architect or licensed professional engineer.

Date project staked (M/D/Y) 02/01/13

#### High Risk Erosion Areas (See Sample Drawing 19)

Parcel dimensions (ft) width ~204' depth ~439'

- For more information go to www.mi.gov/jointpermit, select "HREA" under "Related Links."
- All property boundaries, proposed structure corners, and septic system locations must be staked before the WRD site inspection.
- Scaled overhead plans must include all property boundaries, and the location and dimensions of all structures and septic systems must be included.

•	Additional information,	-including the buildir	ig construction plan	ns, may be required	to complete t	he application review.

Property is a  platted lot  unplatted parcel	Year current property boundaries created 1988		
Dune habitat present in Building Site and access route (check al ☐Bare Sand ☐Lakefront Lot ☐MNFI Community if know			
Type of construction activities ☐ addition ☒ driveway ☒ gara	age ⊠ new home ☐ renovation ⊠ septic ☐ deck(s) ☐ other		
☐ Provide a sand relocation plan with location and dimensions of	of disposal area. Indicate 🗵 on-site OR 📋 off-site		
Provide the permit or letter from the County Enforcing Agent s Control).	stating the project complies with Part 91 (Soil Erosion and Sedimentation		
The proposed project will be serviced by $\square$ public sewer $\boxtimes$ pr	rivate septic system.		
On the plans, show the location and dimensions of the private	septic system.		
If a private septic system is proposed, has a permit been issued	by the health department? ☐ No ⊠ Yes		
If Yes, provide a copy of the permit for all Critical Dune Area p	projects.		
for Michigan" prepared by the Society of American Foresters	o be removed and # of trees to be replanted; OR etation will be performed according to the "Forestry Management Guidelines in 1987, revised in 2010, and may include a program to provide mitigation es that the applicant will plant on the site more trees and other vegetation		
Proposed Utility Installation	Proposed New Construction		
Utility Installation Method	Foundation type		
directional bore plowing in	☑ concrete slab ☐ pilings		
☑ open trench ☐ other	☐ crawl space ☐ other		
⇒Show utility locations and dimensions on the site plan.	Area of existing structure (sq ft)		
⇒Show construction access route on the site plan.	Area of proposed structure (sq ft) ~3,480		
⇒Show existing and proposed grades on the cross-section.	Area of existing deck (sq ft)		
⇒Show locations of vegetation to be removed on the site plan.	Area of proposed deck (sq ft)		
Provide the following information for special use projects:	RECEIVED		

- (a) Lot size, width, density, and front and side setbacks.
- (b) Storm water drainage that provides for disposal of drainage water without serious erosion.
- (c) Methods for controlling erosion from wind and water.
- (d) Re-stabilization plan.

Critical Dune Areas

(e) Environmental Impact Statement.

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application; that it is true and accurate Program. I understand that there revoked if information on this application, I agree to order to inspect the proposed actival other necessary local, county, see the proposed activation of the proposed activation.	irate; and, to the best of my knowledge are penalties for submitting false ication is untrue. I certify that I hat allow representatives of the DEQ vity site before and during constructed, or federal permits and that the permit of the permit requests.	rein. I certify that I am familiar with the info ledge, that it is in compliance with the State information and that any permit issued purs we the authority to undertake the activities p. USACE, and/or their agents or contractors ction and after the completion of the project he granting of other permits by local, county sted herein before commencing the activity.	Coastal Zone Management cuant to this application may be coroposed in this application. By a to enter upon said property in t. I understand that I must obtain a state of federal agencies does
Property Owner	Printed Name	Signature	Date
☐ Agent/Contractor	Phil Johnson, Agent	De yofhan	01/16/13
Corp. or Public Agency / Title		4 mm 4 mm)	

U.S. Army Corps of Engineers www.lre.usace.army.mil Michigan Department of Environmental Quality www.mi.gov/jointpermit

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Erosion Areas	Parcel dimensions (ft)	Date projec	Date project staked (M/D/Y) 02/01/13						
	Existin		Proposed New Construction						
	Foundation type	☐ basement	Foundation	Foundation type		⊠ basement □ pilings			
	concrete slab	pilings		⊠ concrete slab					
	crawl space	other	crawl space		other				
	Material above foundation wall			Material above foundation wall					
	☐ block ☐ log	stud frame other	☐ block	☐ log	⊠ stud frame	other			
	Siding material		Siding mate	rial	<u> </u>				
	block vinyl	wood other	☐ block	⊠ vinyl	⊠ wood	□ other			
High Risk	Area of the foundation, excluding attached garage (sq ft)		Area of the foundation, excluding attached garage (sq ft) ~2804						
H.	Area of the garage foundation (sq ft)		Area of the	Area of the garage foundation (sq ft) 676					
	If renovating or restoring	If renovating or restoring an existing structure, indicate the renovation or restoration cost \$							
	Current structure replace	ement value \$							
	Tax assessed value of existing structure excluding land value \$ Assessment Year  Provide the number of individual living units in the proposed building								

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FEB 1 3 2013

Michigan Department of Environmental Quality Land And Water Management Division / PCU P.O. Box 30204 Lansing, Michigan 48909

Re:

Agent Authorization

To Whom it May Concern:

This letter serves as authorization for Resource Planning & Design, LLC to act as our agent in obtaining any required local, state, or federal construction permits, for activities to be conducted at our property located in White River Township, Muskegon County, MI

If there are any questions regarding this application, or to arrange an on-site inspection, please contact Mr. Philip M. Johnson, Project Manager, at (616) 846-0620 Ext 217, or fax to (616) 844-6079, or e-mail to "johnsonphilip@sbcglobalnet" or you may write to him at 105 W. Exchange, Spring Lake, MI 49456

Sincerely.

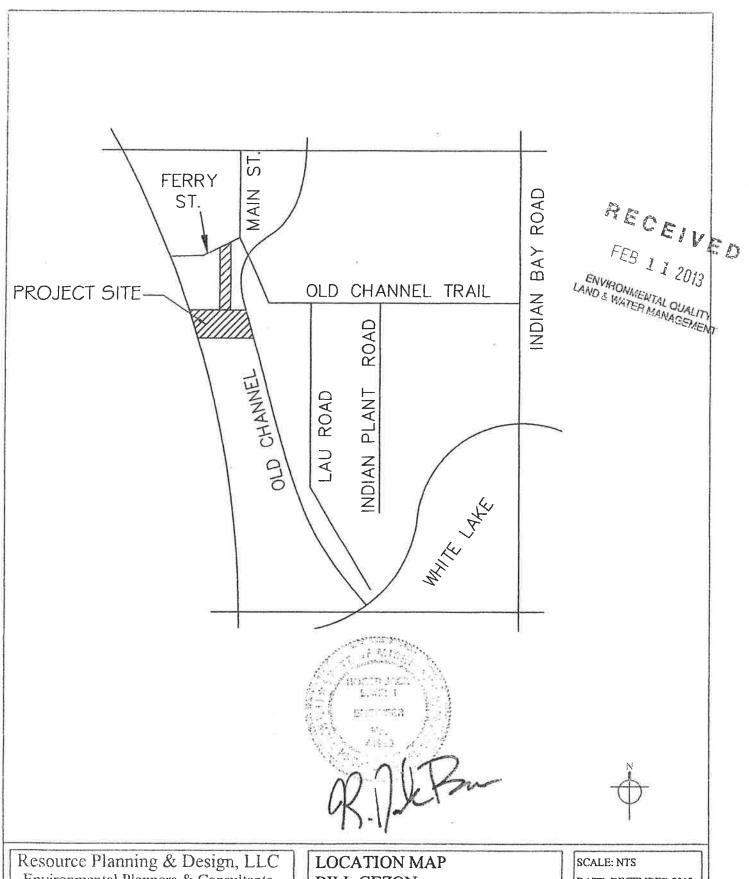
William R. Gezon Managing Partner

Bro-G Land Company

(616) 813-1726

RECEIVED

FEB 1 3 2013



# Environmental Planners & Consultants

105 W. Exchange Street, Spring Lake, Michigan 49456 Phone (616) 846-0620 Fax (616) 844-6079 Specializing in Conservation Design & Open Space Planning

# **BILL GEZON**

TIIN, RI8W, SECTION 2 WHITE RIVER TOWNSHIP MUSKEGON COUNTY, MICHIGAN

DATE: DECEMBER 2012

FILE: SITE2012.dwg

SHEET 1 OF 10



## Resource Planning & Design, LLC Environmental Planners & Consultants

105 W. Exchange Street, Spring Lake, Michigan 49456 Phone (616) 846-0620 Fax (616) 844-6079 Specializing in Conservation Design & Open Space Planning

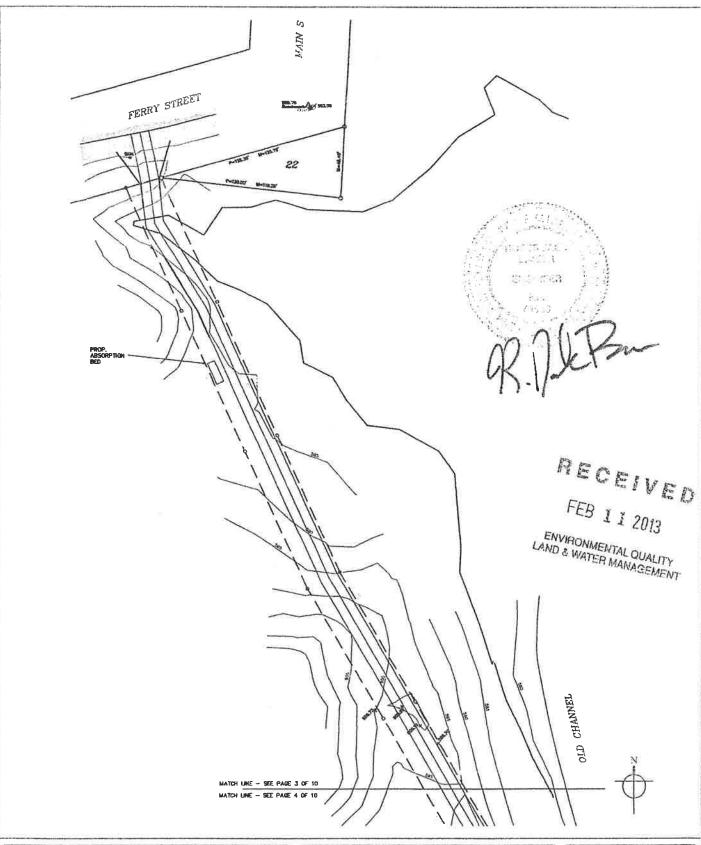
## SITE PLAN BILL GEZON

TIIN, RI8W, SECTION 2 WHITE RIVER TOWNSHIP MUSKEGON COUNTY, MICHIGAN SCALE: 1" = 200'

DATE: DECEMBER 2012

FILE: SITE2012.dwg

SHEET 2 OF 10



## Resource Planning & Design, LLC Environmental Planners & Consultants

105 W. Exchange Street, Spring Lake, Michigan 49456 Phone (616) 846-0620 Fax (616) 844-6079 Specializing in Conservation Design & Open Space Planning

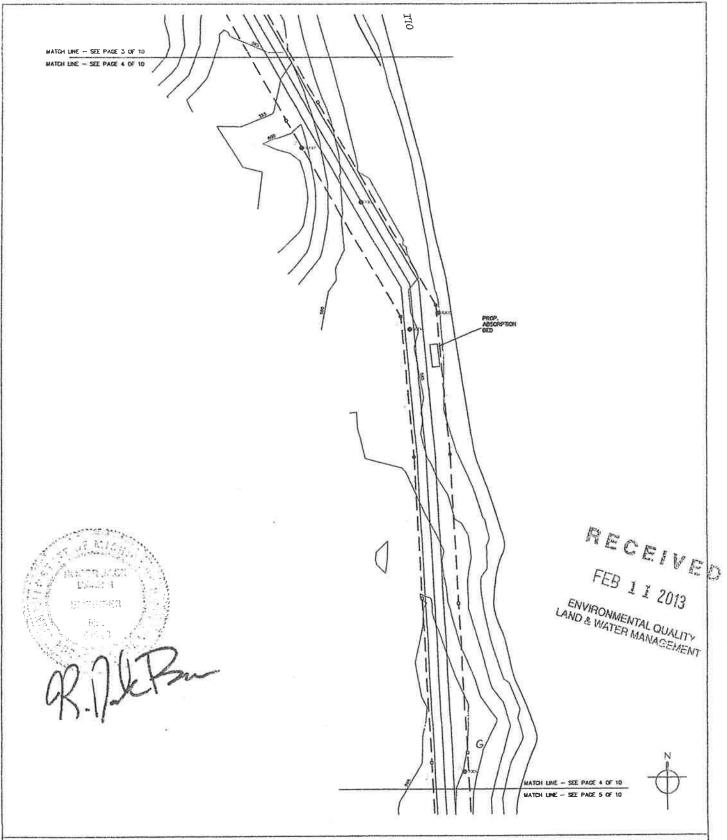
## SITE DETAIL - NORTH BILL GEZON

TIIN, RI8W, SECTION 2 WHITE RIVER TOWNSHIP MUSKEGON COUNTY, MICHIGAN SCALE: 1" = 60'

DATE: DECEMBER 2012

FILE: SITE2012.dwg

SHEET 3 OF 10



# Resource Planning & Design, LLC Environmental Planners & Consultants

105 W. Exchange Street. Spring Lake, Michigan 49456
 Phone (616) 846-0620 Fax (616) 844-6079
 Specializing in Conservation Design & Open Space Planning

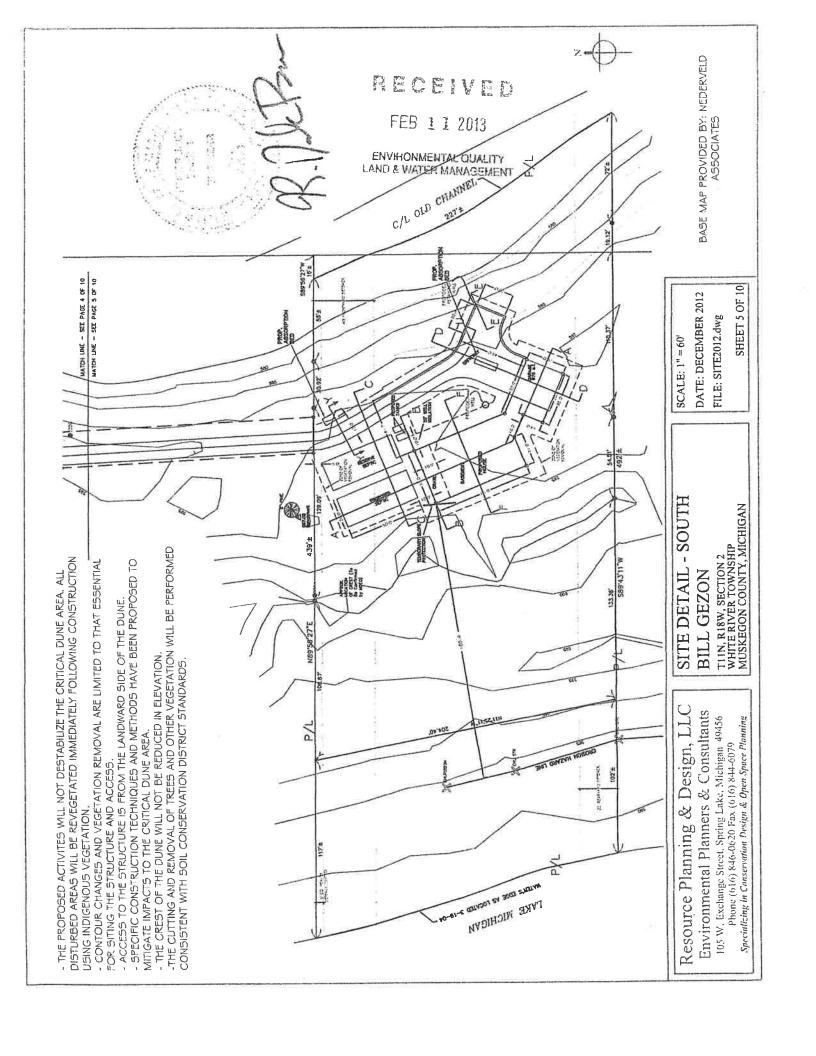
## SITE DETAIL - MIDDLE BILL GEZON

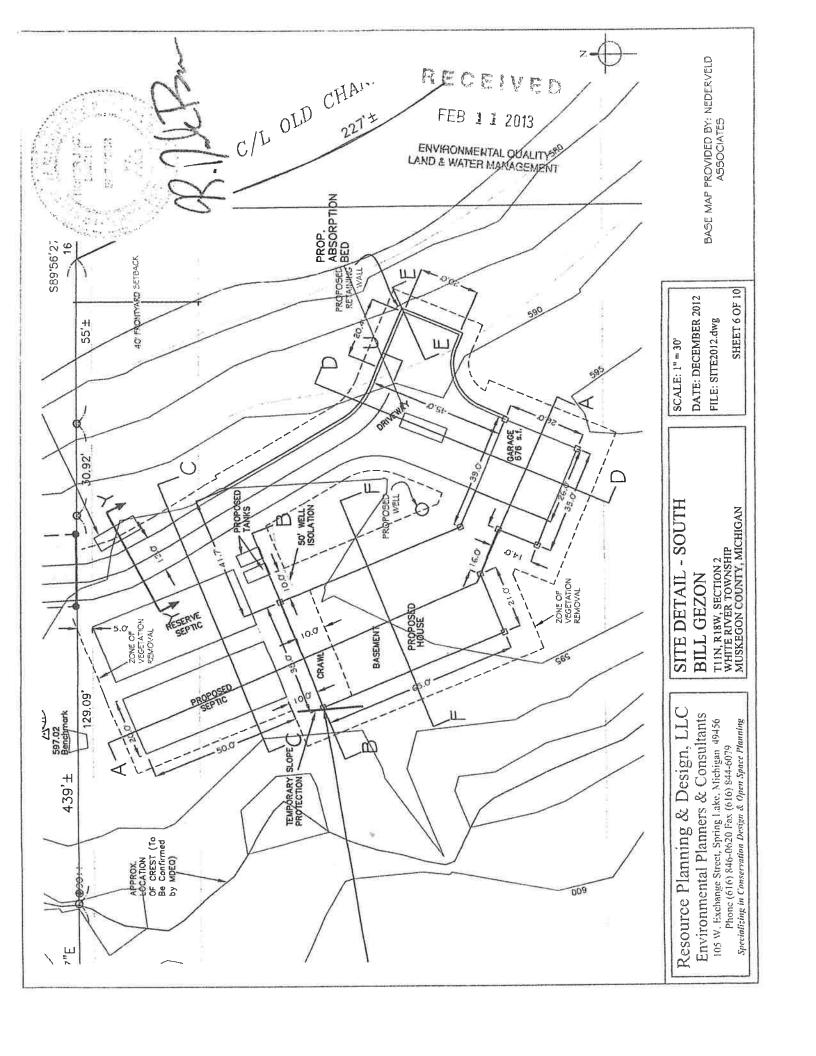
TIIN, RI8W, SECTION 2 WHITE RIVER TOWNSHIP MUSKEGON COUNTY, MICHIGAN SCALE: 1" = 60'

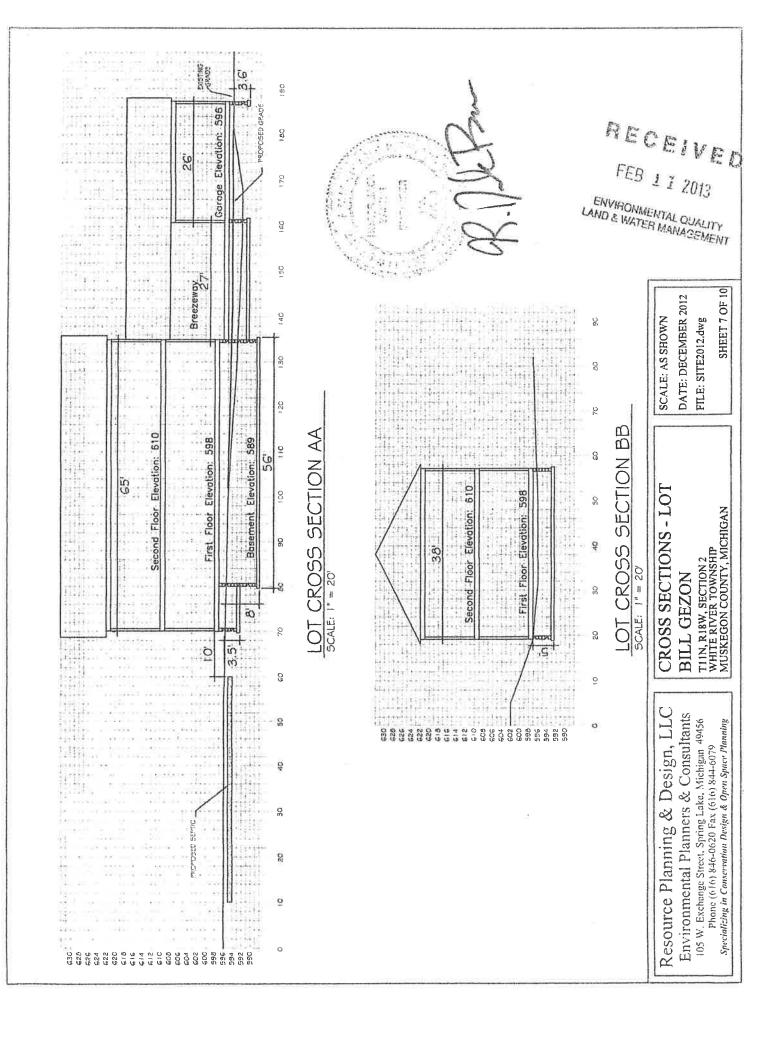
DATE: DECEMBER 2012

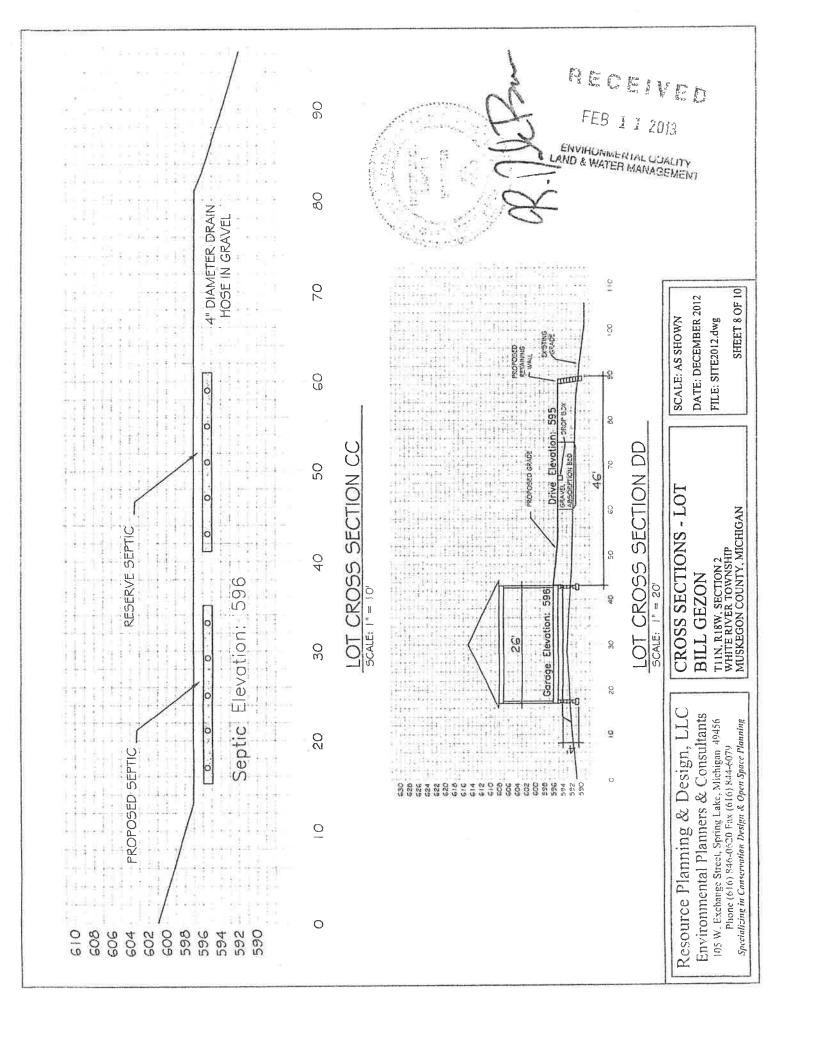
FILE: SITE2012.dwg

SHEET 4 OF 10



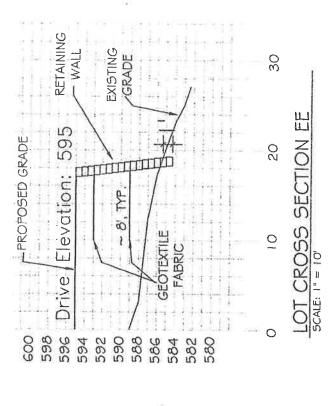


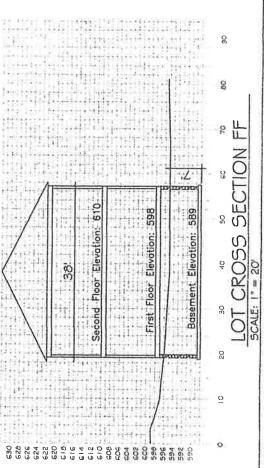




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ENVIRONMENTAL QUALITY LAND & WATER MANAGEMENT



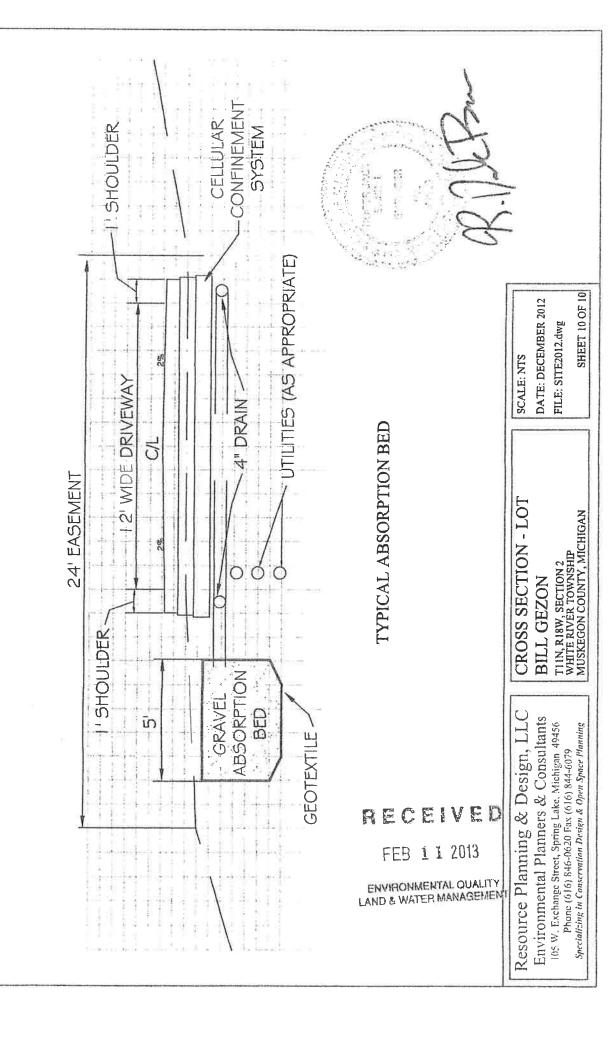


Resource Planning & Design, LLC Environmental Planners & Consultants 105 W. Exchange Street, Spring Lake, Michigan 49456 Phone (616) 846-0620 Fax (616) 844-6079 Specializing in Conservation Design & Open Space Planning

CROSS SECTIONS - LOT T11N, R18W, SECTION 2 WHITE RIVER TOWNSHIP MUSKEGON COUNTY, MICHIGAN **BILL GEZON** 

DATE: DECEMBER 2012 SCALE: AS SHOWN FILE: SITE2012.dwg

SHEET 9 OF 10



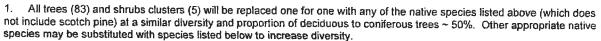
#### Critical Dune Vegetation Removal Assurance APPLICATION

				Estimated Pr	oject Time Frame:
				Start Date	
			Ī	End Date	
Project Location:					
Address: "0" Ferry St.	County: Muskegor	 1	Subdivis	sion/Plot:	Lot Number:
Township: White River Township	Town/Ran 11 N / 18 V	ge:	Section:		
Applicant Information:					
Applicant or Agent: Phil Johnson		Compar	ny Name: ce Planning & I	Desian IIC	100 m 10
Mailing Address: 105 W. Exchange St.				001911/1220	
City: Spring Lake	State MI			Zip Code: 49456	
Daytime Phone Number: 616-846-0620	Fax Number 616-844-60			E-mail Address: johnsonphiliip(	@sbcglobal.net
Property Owner (if different from App William Gezon	licant)	3-311			
Mailing Address: 2464 Pinewood					*
City: Jenison	State: MI			Zip Code: 49428	
Daytime Phone Number: 616-813-1726	Fax Numbe	it.		E-mail Address:	
Contractor:	Address:				
City:	State:	Zip:		Phone:	
Excavator:	Address:				
City:	State:	Zip:		Phone:	
Project Description Please provide a brief description of p	monosed activities inc	ludina impacts	to vegetation:		
Construction of house, garage, drive			-	of sentic system	
		,,	_	R	ECEIVED
					FEB 1 3 2013
				EN 1 A N	IVIRONMENTAL QUALITY D & WATER MANAGEMENT
Driving directions from District office	ce:			1,17,13	

The Conservation District must have assurances that the cutting and removal of trees and other vegetation, as well as planting/stabilizing, will be performed according to District recommendations and site plan modifications listed below.

The Muskegon Conservation District visited the site with agents to review and provide updated comments to a vegetation removal assurance issued by our office on March 28, 2005. Area of disturbance will be contained within roadway easement and building footprint (including house, garage, and septic system). Total number of trees removed for project is 83, along with 5 significant shrub clusters, and include:

- White pine (Pinus strobus) 22
- Red oak (Quercus rubra) 13
- Black cherry (Prunus serotina) 6
- Red pine (Pinus resinosa) 19
- Scotch pine (Pinus sylvestris) 5
- Tamarack (Larix Iaricina) 2
- American beech (Fagus grandifolia) 1
- Red Maple (Acer rubrum) -15
- Sand Cherry (Prunus pumila) shrub cluster
- Ground Juniper (Juniperus commuis) shrub cluster
- Red-osier dogwood (Comus stolonifera) shrub cluster



- Sugar maple (Acer saccharum)
- Jack Pine (Pinus banksiana)
- Eastern red cedar (Juniperus virginiana)
- Black Oak (Qurecus velutina)
- Northern white cedar (Thuja occidentalis)
- Eastern hemlock (Tsuga Canadensis)
- American basswood (Tilia Americana)
- Tamaracks will be replaced one for one in an appropriate location.
- 3. Shrub clusters must be replaced at a density of 5 individual plants / cluster at a 6' X 6' spacing within the cluster.
- 4. Conifers will be planted with 8' spacing and deciduous trees with 10' spacing. Trees will be transplants or "whips", with at least a 3' minimum height.
- 5. Native grasses and wildflowers, including marram grass (*Ammophila breviligulata*) will be planted to stabilize all disturbed areas immediately following completion.

Assurance Agreement: (do not sign prior to Conservation District site review)

Your signature indicates that you have reviewed and understand the assurance guidelines provided and agree to follow the best management practices and any additional recommendations provided by the Conservation District.

Property Owner / Agent Signature:	Printed Name: Philip M Johnson	
Title: Agent	Date: 2/1/13	
Conservation District Representative:	Printed Name:  Jeff Auch	
Title: Executive Director	Date: 16 January 2008	

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## MUSKEGON COUNTY DEPARTMENT OF PUBLIC WORKS SOIL EROSION AND SEDIMENTATION CONTROL (SESC)

131 E. APPLE AVENUE MUSKEGON, MI 49442 PHONE: 231-724-6411

FAX: 231-724-6118 EMAIL: finkst@co.muskegon.mi.us

PROPÉRTY OWNER: Bro-G Land	d Company c/o William Gezon			
MAILING ADDRESS: 2464 Pinev	vood Jenison, MI 49428			
PHONE NO.: 616-813-1726				
PROJECT DESCRIPTION: Constr	ruction of single family home and driveway e	easement access		
PROJECT ADDRESS: "O" Ferry S	Street			
TOWNSHIP OR CITY: White Rive	er Township			
PROJECT PARCEL NO.: 61-01-00 THIS PROJECT:	02-100-0005-00			
	I a permit after the Critical Dune Permit is iss	sued.		
	I a permit after the Natural Rivers zoning has			
Will be considered for/issued	l a permit after township zoning is obtained.	_		
Does not require a SESC peri	mit because:	RECEIVED		
it is over 500 feet from wathere is no earth disruption	ater and less than 1 acre of disturbance	FEB 1 3 2013		
there is less than 225 square feet of earth disruption  ENVIRONMENTAL  meets requirements of Part 91, Section 324.9115a for residential properties only WATER MAN				
This written assurance form does no state or federal permits.	ot release the project from obtaining other ap	plicable local,		
If project does not require an SESC practices to prevent any sediment fr	permit, the owner/agent is required to use be com leaving the site.	est management		
Department Approval Stamp:	APPROVED FOR			
Dated: December 10, 2012	SOIL EROSION CONTROL ONLY  MUSKEGON COUNTY  DEPT OF PUBLIC WORKS			

DATE: See date to left.

Approval of plan and the installation cannot be considered as a guarantee by the Health Department that successful operation is assured. Regulations are subject to change. Permit expires two (2) years from the date issued.

WHITE COPY - PHMC

YELLOW COPY - TO APPLICANT

COPY OF FINAL TO OWNER

6201-10(3/12)

	WATER WELL SUPPLY PERMIT				Permit Numbe	1456	
	In accordance with Act 368 P.A. 1978 & Muskegon Sanitary Cod	e					**********
	PUBLIC HEALTH MUSKEGON COUNTY - ENV	1RO	NV	1EN	ALAT HEYTLH DIA	ISION	÷
	PHONE: (231)724-6208 www.muskegonhealth.net Contact/Location Information During Collect / In	沉忧	an	Ci	egon Kenn	11 St ///	Oliand
	PERMIT CONDITIONS Contact I	PHM	C fo	r Fi	nal Inspection and So on Required to Compl	ample Collec	tion.
	(ff) Regulard Isolation Distance to all Source	ii Co	nne	CHIC	Occupation Complete	lete Final ins	pection.
	50 (ft) Required Isolation Distance to all Sewag to: sump pits, sewer lines, pump chambers, tanks, dry	well	spc s a	nd (	drainfields.	ling but not li	mited
	(ft) Required Isolation Distance to						
	Minimum Required Casing Depth <u>A5</u> feet A	ea we	lis a	re ge	enerally between $\frac{18}{9}$ fee	et and <u>133</u> fee	t deep.
	ALL EXISTING UNUSED WELLS must be properly al submitted for final well approval.	band	lone	ed a	and the required abai	ndonment lo	3
000	DISCHARGE OF WATER TREATMENT AND/OR SO disposal system is prohibited.	FTE	NE	RB	ACKWASH into an o	onsite sewag	е
12	ADDITIONAL PERMIT CONDITIONS: LIDY 2 C	) ~	0	1/	mg/L		
1. 1.	The state of the s		-		<del>\</del>		
19							
	Alan Con		~	10	1 1000	rus V	10
1 11	ISSUED BY SANITARIAN ( WARM CORDINAL PHONE NUM SITE EVALUATION	19ER		Q.	4. 1257 DATE	17 Nec	12
	TEST BORING PRIOR TO PERMIT (N)	DEPT	HRE	STR	RICTIONS (SUBDIVISION)	X N) N	A
(v)	AREA WATER QUALITY REVIEW (Y) N. NA )	ABAN	DON	N DI	STANCES SPECIFIED WELLS TO BE PLUGGED	Y N N	A) UNK
	KNOWN W/Q PROBLEMS IN AREA Y (N) NA UNK	PRED	RILL	ING	SITE REVIEW COMPLETE	D Y'N N	
ADDRESS	KNOWN SITES OF CONTAMINATION Y (N) NA UNK KNOWN SHALLOW WELL AREA Y (N) NA	CUPY	OF	DEE	D RESTRICTIONS TO FILE	YNN	9
I BI							
11			-53100				
		EVAL	LAU	ION	BY (NE)	DATE / 7X	013
	FINAL INSPECTION - FOR LOCATION SEE AS BUILT D	RAW	*****	-			Average and
	WELL LOCATION APPROVED (1621; 1622; 1624; 1625) PROTECTED FROM CONTAMINATION	$\dashv$	Y	N	COMPONENTS APP	ROVED .ocation (1651)	Y N Y N
	Well Cap Vented (deep well/single pipe packer,	1657)	Y	N	Pressure Tank L	ocation (1651)	
	Suction Line Protected (	1654)	٧	N	Pressure Relie	of Valve (1657)	YN
	Well Casing Termination Approved (1632; 1634; 16	1635)	Y	N	Electrical Conduit/		YN
2	WELL CONSTRUCTION SATISFACTORY (1626; 1627; 1631; 1632; 1	6391	Y	N	Cross Connections (%	ing Tap (1658)	YN
	WELL PLUGGING RECORD/METHOD IN ORDER (1862; 1663; 1664; 1667; 1668; 1669)	AV	Y	N	Other:	old (1908) (1014)	
1-4	ISOLATION FROM SEPTIC SYSTEM (1621; 1622) for	eet	DA	TE V	VELL RECORD REC. (167	75)	
2	TEST RESULTS   DATE COLLECTED   RESULTS		-		DATE COLLECTED	-DECLIETO	
	Bacteriologic (1 <sup>st</sup> )	VItrate	e (1	st)	DATE GOINT CITES	LE SOFIS	ppm)
1	Bacteriologic (2 <sup>nd</sup> )	Vitrate	3 (2	) ( <sub>gar</sub>		2012	
				~	FEB 1	2 2013	
TOWNSHIP:						ENTAL QUALITY	
S	WATER WELL SUPPLY APPROVED? YES NO	<u> </u>	J. 1011		37.11.150 to 1.000.00		
	WILLIAMER GOLLET WELLYONEDI. 152 MC	,	-		SANITARIAN	DA	TE.
12	Approval of plan and the installation cannot be considered as a guarantee b	w the !	Upal	lh D-			
	Regulations are subject to change. Permit expires two (2) years from t	he dat	e Iss	ued,	sharaneur mar anccessinj ob	eration is assured	1,

YELLOW COPY - INITIAL TO APPLICANT

XEROX FINAL TO OWNER WELLPERMIT 6201-15 (REV 8-11)

WHITE COPY - PHMC