

Receipt #: _____

APPLICATION FOR ARTIFICIAL POND PERMIT

Permit #: _____

MADISON COUNTY DRAINAGE BOARD
16 E. 9th St., Anderson, Ind. 46016
Office: (765) 641-9687 Fax: (765) 641-9578

In conformance with the Madison County Drainage Board Ordinance, application is hereby made to construct an artificial pond by:

OWNER/APPLICANT NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

CONTRACTOR/INSTALLER: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

To establish and maintain an artificial pond on property located at:

Parcel number: _____

Primary purpose of pond: (e.g., fish hatchery, agricultural animal watering storm water detention and storage, decoration)

Describe the character, nature, and size of the proposed pond:

Identify steps taken to prevent the pond from becoming stagnant or steps in prevention of other similar problems:

Will the land distribution required to construct the pond be greater than one (1) acre? YES NO

If YES, a Storm Water Quality Management Permit (SWQMP) is required.

List SWQMP number: _____

Will soil, stone, or fill be removed from the parcel(s) on which the pond is being constructed? YES NO

If YES, specify the route to be taken by all vehicles leaving the proposed construction site with soil, stone, or fill: _____

If YES, specify the time of day and/or days of the week vehicles leaving the proposed construction site will operate: _____

If YES, estimate the volume in cubic yards of soil, stone, and fill to be removed: _____

If YES, identify dust control measures for the dust created by the vehicles leaving the site: _____

List all health measures that will be taken in the construction and/or maintenance of the proposed pond to prevent the spread of disease or other conditions dangerous to public health:

Will the proposed pond discharge into the public sanitary sewers? YES NO

Does the proposed pond cross parcel lines? YES NO

If YES, has Planning Commission approval been obtained? YES NO

Attach to this application a detailed, scaled drawing of the proposed pond showing, at a minimum:

- The proximity to adjoining properties
- Front, side, and rear setbacks
- Setbacks from buildings
- Location of any on-site field
- Slope to banks or sides of pond
- Location of surface outlet
- Location of emergency overflows

APPLICATION CERTIFICATION AND ACKNOWLEDGMENT

I hereby certify that the information submitted in this application is complete and accurate to the best of my knowledge. My signature below also acknowledges that parcel owners are ultimately responsible for any pond location and are further responsible for obtaining any and all required State of Indiana and U.S. Army Corps of Engineers permits.

Applicant Signature

Date

No pond shall take longer than 60 days to complete from the date of starting.

FOR OFFICIAL GOVERNMENT USE ONLY

1. Was a drainage study conducted? YES NO

2. Does the proposed pond restrict or affect the flow of water or natural drainage to and from adjacent parcels? YES NO

3. Does the proposed pond cause or contribute to erosion of any adjoining property? YES NO

Should a permit be granted on this application? YES NO

Madison County Surveyor

Date

Qualified Authority of the Madison County Drainage Board

Permit number:		Pond size (acres):	
Date issued:		Pond permit costs:	