Erosion Control Application

Town / Village of Harrison

Name of owner. _____

Address of project. _____

City. _____

Contractor name: _____

Address: _____

City: _____

Phone #: _____

Type of erosion control to be installed: Separate site plan included: _____

Silt Fence:_____   Bales: _____   Vegetation: _____ Erosion Matt:_____

I, the undersigned Owner/Contractor, do hereby agree to comply with SPS 321.125 & 321.126 of the Wisconsin Dept. of Safety & Professional Services building code viewable at dsps.wi.gov/sb/SB-DivCodesListing.html

_____

Home Owner or Contractor.

Date: _____