



**WETLAND BOUNDARY DETERMINATION
APPLICATION**
 City of Novi Community Development Department
 City of Novi Planning Division
 45175 W. Ten Mile, Novi, MI 48375
 248-347-0475; 248-735-5633 fax

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|--------------|
| Project Name |
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Use Tab function to navigate form. Point and click cursor to check boxes.

| | | | | | | | |
|------------------|----------------|--|-----------------|------|--|-------|-----|
| APPLICANT | Company | | Primary Contact | | Professional License Number, if applicable | | |
| | Street Address | | Suite | City | | State | Zip |
| | Phone Number | | Fax Number | | E-mail address | | |

| | | | | | | | |
|----------------|-------------------------|--|--------------------|------|--|-------|-----|
| WETLAND | Wetland Consulting Firm | | Primary Consultant | | Professional License Number, if applicable | | |
| | Street Address | | Suite | City | | State | Zip |
| | Phone Number | | Fax Number | | E-mail address | | |

| | | | | | | | |
|--------------|----------------|--|---|------|----------------|-------|-----|
| OWNER | Project Name | | Legal Name of Ownership, with Primary Contact | | | | |
| | Street Address | | Suite | City | | State | Zip |
| | Phone Number | | Fax Number | | E-mail address | | |

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|----------------------------|--|--|---|--|--|--|
| PROJECT INFORMATION | Property Address, if known | | North or South of which road? | | East or West of which road? | |
| | Parcel Number(s) (Contact Assessing Dept. if unknown) | | Gross Site Acreage <small>Size will be reviewed against Assessor's Records</small> | | Wetland Acreage <small>If unknown, 2 acres will be used initially</small> | |
| | Brief description of on-site wetlands. Attach additional sheets if necessary | | | | | |

Submittal Requirements:

- Three folded sets of plot plans which identify existing watercourses and wetland areas
- Original signed copy of this application.
- Notarized original signature of Landowner authorizing permission, if Applicant is not the owner.

I do hereby attest that all statements, signatures, descriptions, and exhibits submitted on/or with this application are true and accurate to the best of my knowledge and I am the property owner or I am authorized to file this application and act on behalf of the property owner and I have attached a notarized statement from the owner who grants me permission to act on his/her behalf. I acknowledge that by making this application I have consented to the entry of City officials, employees, agents, and/or representatives for all purposes in connection with this application and to insure compliance with City Ordinances.

Signature of Applicant

Date

Printed Name of Applicant

Signature of Landowner

Date

may be submitted on separate notarized document

Printed Name of Owner

Notary

Date

County: _____

State: _____