



# City of Monona Public Works Department

## STORMWATER UTILITY APPLICATION FORM

Today's Date:	Parcel Number:		
<b>PROPERTY OWNER INFORMATION</b>			
Owner Last Name:		Owner First Name:	
Home phone:	Cell phone:	Email:	
<b>PARCEL INFORMATION</b>			
Address:			
Is this a newly purchased or recently purchased property?		<input type="checkbox"/> YES	or <input type="checkbox"/> NO
Was this parcel recently split from, or merged with, another parcel?		<input type="checkbox"/> YES	or <input type="checkbox"/> NO
<b>PROJECT DESCRIPTION</b>			
Please describe the work you are doing:			
<b>Estimated Schedule:</b>			
Start Date:		End Date:	
Contractor Company Name:			
Contractor Foreman Name:			
Contractor Phone No.:			
Contractor Email:			
<b>IMPERVIOUS AREA CHANGES</b>			
<p><b>IMPERVIOUS SURFACE</b>, as defined in the Monona Code of Ordinances, Chapter 216-4 – Erosion and Stormwater Control Definitions, is land cover that prevents rain or melting snow from infiltrating into the ground, such as roofs (including overhangs), roads, sidewalks, patios, driveways and parking lots. All road, driveway or parking surfaces, including gravel surfaces, are considered impervious, unless specifically designed to encourage infiltration and approved by the Director. Decking is considered impervious by Dane County standards if the soil beneath the decking is anything other than top soil or native soils. Decking is considered an impervious surface unless the property owner can prove otherwise.</p> <p>Please check the box next to <b>ONE</b> of the descriptions below that best describes the changes to the parcel and fill out the information required under each heading.</p>			
1) <input type="checkbox"/> <b>PROJECT WILL NOT CHANGE THE IMPERVIOUS SURFACE ON THE EXTERIOR OF THE PROPERTY</b>			
2) <input type="checkbox"/> <b>FULL DEMOLITION WITH <u>NO</u> REBUILD</b>			
Were ALL impervious surfaces demolished and/or removed?		<input type="checkbox"/> YES	or <input type="checkbox"/> NO
If YES, should the new square footage of impervious surfaces be " 0 " ?		<input type="checkbox"/> YES	or <input type="checkbox"/> NO
3) <input type="checkbox"/> <b>PARTIAL DEMOLITION WITH <u>NO</u> REBUILD</b> Impervious area post construction: _____ Sq. Ft.			
<b>OR</b>			
4) <input type="checkbox"/> <b>PARTIAL DEMOLITION WITH REBUILD</b> Impervious area post construction: _____ Sq. Ft.			

5)  **NEW ADDITION**

Final Impervious Area according to site/building plan: \_\_\_\_\_ Sq. Ft.

\*\* (Impervious space added to original structural footprint. Do not add impervious sq. ft. for any area of the new addition that is replacing impervious space from the original footprint of the existing structure.)

**OR**

6)  **NEW ADDITION: EXTERNAL FACILITY ONLY** (non-attached garage, shed, boathouse, patio, deck)

Final Impervious Area according to site/building plan: \_\_\_\_\_ Sq. Ft.

\*\* (Impervious space added to original structural footprint. Do not add impervious sq. ft. for any area of the new addition that is replacing impervious space from the original footprint of the existing structure.)

7)  **FULL DEMOLITION WITH NEW CONSTRUCTION**

Were all impervious areas demolished before new construction?  YES or  NO

Final impervious area per the site/building plan: \_\_\_\_\_ Sq. Ft.

8)  **NEW CONSTRUCTION ON PREVIOUSLY VACANT LOT WITH 0 sq. ft. OF EXISTING IMPERVIOUS**

Final impervious area per the site plan: \_\_\_\_\_ Sq. Ft.

**DOCUMENTATION REQUIREMENTS**

Site or building plans and/or map clearly defining impervious surface area changes must accompany this application and any building permit application for projects that will change the amount of impervious surfacing on a parcel. Site/building plans must have clearly labeled dimensions for all impervious surfaces.

**SITE or BUILDING PLANS ATTACHED:**  YES or  NO

I hereby certify, under penalty of perjury, that the above information is true and correct, and I understand that any future changes to the scope of work described above that result in a change in the impervious areas indicated above must be reported to the City via a re-submission of this form. I further understand that any information provided may be confirmed through site inspections and/or GIS technology.

X \_\_\_\_\_ Date: \_\_\_\_\_

Signature

\_\_\_\_\_  
Printed Name

**THIS SECTION FOR OFFICE USE ONLY**

**Application Received By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Database/GIS Data Updated By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Site Plan/Maps to GIS Coordinator on Date:** \_\_\_\_\_

**Notes:**

Questions? Please contact Brad Bruun, City of Monona Public Works Project Manager and GIS Specialist

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