

**Liberty Township  
Drainage, Erosion, and Sediment Control (DESC)  
Permit Application**

**A copy of this must be posted on the site at all times.**

Land Owner/Subdivision Name: \_\_\_\_\_

Project Location/Lot Number: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

Site Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Site Contact Address: \_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

Erosion and Sediment  
Control Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor Address: \_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-Submit a site plan, to scale, from the Fairfield Department of Health identifying the house, leach field and well.

-Submit a site plan, to scale, with additional or other projects to be built at the same time including the driveway, ponds, pools and auxiliary structures and a graphic representation of best management practices for erosion control to be installed.

*Permit # will be issued upon review and approval of DESC Plan and Permit Application*

Office Use Only

\_\_\_\_\_ DESC submittal meets the requirements

\_\_\_\_\_ DESC submittal requires additional measures, please note

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ DESC permit # issued

DESC permit # \_\_\_\_\_