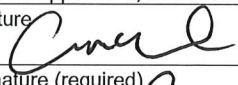




EROSION CONTROL AND STORMWATER MANAGEMENT PERMIT APPLICATION

Applicant Information			
Applicant Name (Indiv., Org. or Entity) <small>Kaukauna Area School District</small>		Authorized Representative Chris McDaniel	Title Dir. of Operations & Finance
Mailing Address 101 Oak St		City Kaukauna	State <small>WI</small> Postal Code 54130
E-mail Address mcdanielc@kaukaunasd.org		Telephone (include area code) 920-759-6104	Fax (include area code)
Landowner Information (if different than Applicant)			
Name (Organization or Entity)		Contact Person	Title
Mailing Address		City	State Postal Code
E-mail Address		Telephone (include area code)	Fax (include area code)
Other Contact Information (check one): <input checked="" type="checkbox"/> Engineer / Consultant <input type="checkbox"/> Contractor / Builder <input type="checkbox"/> Agent / Other			
Name (Organization or Entity) Point of Beginning		Contact Person Geno Carlson	Telephone (include area code) 715-344-9999
Mailing Address 4941 Kirschling Ct		City Stevens Point	State <small>WI</small> Postal Code 54481
Project or Site Location			
Site Name (Project): Victor Haen bldg Addition		Parcel Numbers: 321058600	
Address / Location: 1130 Haen Dr., Kaukauna, WI, 54130		Plat / CSM / Lot No.: Lt 3, Bk 51, Assessor's Plat	
Permit Type & Fees (check all that apply)			
<input type="checkbox"/> Erosion Control < 1 acre or 43,560 sq.ft. Disturbed Area (EC1) <input type="checkbox"/> Stormwater Management < 20,000 sq.ft. Impervious Area (SM1)			
<input checked="" type="checkbox"/> Erosion Control ≥ 1 acre or 43,560 sq.ft. Disturbed Area (EC2) <input checked="" type="checkbox"/> Stormwater Management ≥ 20,000 sq.ft. Impervious Area (SM2)			
Total Disturbed Area <small>3.772 acres</small> 164309		sq.ft. x \$0.0002 / sq.ft. (EC2) = \$ 32.86	
New Impervious Area <small>0.788 acres</small> 34314		sq.ft. x \$0.0025 / sq.ft. (SM2) = \$ 85.79	
Base Fee: \$200 (EC1), \$250 (EC2), \$200 (SM1), \$500 (SM2) = \$ 750			
Total Application Fee = \$ 868.65			
Duration of Land Disturbance <small>4.5 mos</small> 20		weeks x \$25 / week (EC1, EC2) = \$ 500	
Start Date..... 08/18/25		Base Fee: \$250 (EC2), \$500 (SM2) = \$ 750	
End Date..... 12/30/25		Total Inspection Fee = \$ 1,250	
TOTAL PERMIT FEE (Application Fee + Inspection Fee) = \$			
Certification & Permission			
Certification: I hereby certify that I am the landowner of the property which is the subject of this Permit Application. I certify that the information contained in this form and attachments is true and accurate. I understand that failure to comply with any or all of the provisions of the ordinances and/or permit may result in notices, fines / forfeitures, stop work orders, permit revocation, and cease & desist orders.			
Permission: As landowner of the property, I hereby give the Director of Public Works or designee, permission to enter and inspect the property to evaluate this permit application, determine compliance with ordinances, and perform corrective actions after issuing proper notice to the landowner.			
Applicant Signature 		Date Signed 05/01/2025	
Landowner Signature (required) 		Date Signed 05/01/2025	
LEAVE BLANK – FOR MUNICIPAL USE ONLY			
Date Application Received:		Fee Received \$	Receipt No:
Construction Site ID / Permit No:		Date Issued:	Issued By: