



## TRANSFER OF OWNERSHIP APPLICATION

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A. Name of Project: \_\_\_\_\_

B. Stormwater Plan Review Approval Date: \_\_\_\_\_

C. NPDES Permit Coverage Number (if applicable): \_\_\_\_\_

D. Owner/Developer: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Phone (Day): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Fax): \_\_\_\_\_

Email Address: \_\_\_\_\_

E. Property Information:  Check Box if same as above

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Parcel/TMS#(s): \_\_\_\_\_

F. Previous Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Phone (Day): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Fax): \_\_\_\_\_

Email Address: \_\_\_\_\_

G. Engineer, Technical Representative or Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Phone (Day): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Fax): \_\_\_\_\_

Email Address: \_\_\_\_\_



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### H. Other Information:

- a. If there are no modifications being made to the plans, include one (1) set of plans with signed Designer and Applicant's certification statements. (This set of plans maybe submitted on 11x17 as long as it is legible).
- b. If this is a subdivision where a lot or group of lots are being transferred, include a plat sheet with the lot or group of lots that are being transferred clearly outlined. (This set of plans maybe submitted on 11x17 as long as it is legible).

### Original Applicant's Certification

I hereby relinquish the responsibility and ownership of the Dorchester County Permit listed in Item B above. I realize that the construction activity responsibility for the identified project, lot, and/or group of lots now belong to the new applicant.

Original Applicant's Printed Name: \_\_\_\_\_

Original Applicant's Signature & Date: \_\_\_\_\_

### New Applicant's Certification

I hereby certify that all construction and/or development will be done pursuant to this plan and I am responsible for the construction activities and related maintenance thereof. Dorchester County authorities will be allowed to enter the project site for the purpose of on-site inspections.

New Applicant's Printed Name: \_\_\_\_\_

New Applicant's Signature & Date: \_\_\_\_\_