City of Charlotte & Mecklenburg County
Soil Erosion and Sedimentation
Control Ordinance

Financial Responsibility/Ownership Form

No person shall initiate any land-disturbing activity covered by Chapter 17, Article 2 of the Charlotte City Code or Section 6 of the Mecklenburg County Sedimentation and Erosion Control Ordinance prior to completing and filing this form with the City of Charlotte Engineering and Property Management Department, Land Development Services Division or Mecklenburg County Land Development Services. The financial responsibility party will be on record as the party to accept any Notices of Violation or related documents for any non-compliance of the City of Charlotte Soil Erosion and Sedimentation Ordinance. If the financially responsible party is out of State, a North Carolina agent must be assigned.

Please Type or Print

PART A

1. Project where land-disturbing activity is to be undertaken: ________________________________

2. Address of land-disturbing activity: ________________________________

3. Approximate date land-disturbing activity will commence: ________________________________

4. Purpose of Development (Residential, Commercial, Industrial, etc.): ________________________________

5. Approximate acreage of land to be disturbed or uncovered: ______________

6. List total site acreage: ______________

7. Landowners of Record (Use blank page to list additional owners):

   Name: ________________________________
   Address: ________________________________
   Telephone: ________________________________ Fax: ________________________________
   Email Address: ________________________________
   Signature: ________________________________

   Name: ________________________________
   Address: ________________________________
   Telephone: ________________________________ Fax: ________________________________
   Email Address: ________________________________
   Signature: ________________________________

8. Indicate Book and Page where deed or instrument is filed (Use blank page to list additional deeds or instruments) Book_____ Page ______ Book_____ Page ______

   Book_____ Page ______ Book_____ Page ______
   Book_____ Page ______
PART B
1. Person(s) or firm(s) financially responsible for this land-disturbing activity:

   Person or Firm: _______________________________________________________________
   Address: _______________________________________________________________________
   Telephone: ___________________________ Fax: ________________________________
   (Area Code) (Area Code)
   Email Address: ______________________________________________________________

2. North Carolina agent, for the person or firm who is financially responsible:

   Person or Firm: _______________________________________________________________
   Address: _______________________________________________________________________
   Telephone: ___________________________ Fax: ________________________________
   (Area Code) (Area Code)
   Email Address: ______________________________________________________________

3. The above information is true and correct to the best of my knowledge and belief and was provided by me while under oath. (This form must be signed by the financially responsible person if an individual or by an officer, director, partner, attorney-in-fact, or other person with authority to execute instruments for the financially responsible company or entity, if not an individual.)

   ___________________________________________ Title ________________________________
   Printed Name        ___________________________ Date ____________________________
   Signature

   I, ___________________________________________, a Notary Public of the County of ___________________________, State of ____________________________, hereby personally appear before me this day and under oath acknowledge that this form was executed by him/her.

   Witness my hand and notarial seal, this ____________ day of ____________________________, 20__________
   Notary Signature: ____________________________________________________________
   My Commission expires: ______________________________________________________

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Land Development Division
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http://landpermits.charmeck.org