



Application for
Sediment and Stormwater Management
CERTIFIED CONSTRUCTION REVIEWER

Project Information

Project Name: _____

Approval Number: _____ Approval Date: _____

Location: _____

Owner Information

Owner/Developer Name: _____

Address: _____

Phone: _____ Fax: _____

Certified Construction Reviewer Information

CCR Name: _____ Certification No.: _____

Employer: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Supervising Registered Delaware Professional Engineer Information

P.E. Name: _____ Registration No.: _____

Employer: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

The following certifications shall be completed prior to approval of this application:

Owner/Developer Certification

“I/We understand the conditions imposed by the requirement of DNREC that a Sediment and Stormwater Certified Construction Reviewer be present on site for the purpose of ensuring the adequacy of construction pursuant to the approved sediment and stormwater management plan and requirements of Section 12, *Delaware Sediment and Stormwater Regulations*. I/We hereby authorize the right of entry for periodic site inspections by the Certified Construction Reviewer, State of Delaware Department of Natural Resources and Environmental Control Personnel and/or authorized agents.”

Owner/Developer Signature

Date

Owner/Developer Printed Name

Certified Construction Reviewer Certification

“I understand the responsibilities required of me to perform the duties of Certified Construction Review as outlined in Section 12, *Delaware Sediment and Stormwater Regulations*, and I understand the site review procedures as required by DNREC, Division of Soil and Water Conservation, Sediment and Stormwater Program”

Certified Construction Reviewer Signature

Date

Certified Construction Reviewer Printed Name

Professional Engineer Certification

“I understand the responsibilities of the Sediment and Stormwater Management Certified Construction Reviewer as outlined in Section 12, *Delaware Sediment and Stormwater Regulations*, and I agree that _____ will work under my direction to provide sediment and stormwater management site review for this project as required by DNREC.”

Professional Engineer Signature

Date

Professional Engineer Printed Name

Application Approval

Approved by: _____

Date: _____

Title: _____