PLANNING AND INSPECTIONS
BUILDING & DEVELOPMENT PERMITTING
Land Development Section

This application is to request review and approval of a Storm Drain Pollution Control Plan (SDPCP), in accordance with Chapter 15.20 of the Storm Water Management Ordinance of the El Paso Municipal Code approved on June 3, 2008. If work is in conjunction with construction activities, the applicant shall comply with the "one call" notification system in Section 18.44.190 of the Grading Ordinance.

Case # ____________________________
(Not to be filled out by applicant, assigned by Planning Dept.

PID # ____________________________ (Central Appraisal Tax Identification Number)

Address ____________________________

Legal Description: Subdivision ____________________________
Lot ________________ Block ____________

Receiving Body of Water: ____________________________

CONSTRUCTION START DATE: ____________________________
CONSTRUCTION END DATE: ____________________________

NPDES #: ____________

Construction Activities:
Disturbed Area in Acres ____________

Contractor ____________________________

I have checked for Zoning Conditions, Special Contract Conditions and requirements for Site Development Plan. Verify Zoning, if special conditions exist, Submit 2 Copies with Application

APPLICANT INFORMATION:

Print Name ____________________________ Phone ____________

I request review and approval of the attached Storm Drain Pollution Control Plan. I agree to comply with all provisions of the El Paso Municipal Code.

____________________ ______________________
Signature Date

A copy of the permit MUST be at the job site.

STORM WATER ADMINISTRATOR

SDPCP Approval Date: ____________________________
Approved By: ____________________________

Inspections 1-915-212-1555
Required: TEXAS ONE CALL SYSTEM 1- 800- 344- 8377 OR 1- 800- DIG-TESS
Track Permitting/Inspection Process: www.elpasotexas.gov
SELECT Virtual City Hall / SELECT Check on a Building Permit
CONTACT INFORMATION

Contractor ____________________________________________
Primary Contact _______________________________________
Address _____________________________________________
City _________________________________________________
State ________________________________________________
Zip _________________________________________________
Phone (____)_______________________________________
Fax (____)________________________________________
Email ______________________________________________

Owner’s Name _________________________________________
Address _____________________________________________
City _________________________________________________
State ________________________________________________
Zip _________________________________________________
Phone (____)_______________________________________
Fax (____)________________________________________
Email ______________________________________________

SDPCP Preparer _______________________________________
Address _____________________________________________
City _________________________________________________
State ________________________________________________
Zip _________________________________________________
Phone (____)_______________________________________
Fax (____)________________________________________
Email ______________________________________________

Architect ____________________________________________
Address _____________________________________________
City _________________________________________________
State ________________________________________________
Zip _________________________________________________
Phone (____)_______________________________________
Fax (____)________________________________________
Email ______________________________________________

Engineer ____________________________________________
Address _____________________________________________
City _________________________________________________
State ________________________________________________
Zip _________________________________________________
Phone (____)_______________________________________
Fax (____)________________________________________
Email ______________________________________________