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### AFFIDAVIT FOR SESC 225 EXEMPTION

Pursuant to Part 91, Soil Erosion and Sedimentation Control, Act 451 of the Public Acts of 1994, as amended.

**Exemption fee: \$30.00**

Office Use Only	
Amount Paid:	
Date:	
Cash/Check:	
Receipt #:	

Owner's Name: \_\_\_\_\_

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

Mailing Address, if Different from Site Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**LEGAL DESCRIPTION:**

Property Tax ID#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ T: \_\_\_\_\_ N R: \_\_\_\_\_ E/W Section: \_\_\_\_\_

**DESCRIPTION OF EARTH CHANGE PROJECT:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_, as the property owner, do hereby certify that the earth change at the above referenced property will disturb less than 225 square feet and the earth change will NOT contribute sediment to lakes, rivers or streams.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

The request for a SESC permit waiver has been reviewed by LMASDHD and is hereby issued in accordance with Rule 1705(2) of Part 91.

Sanitarian Signature: \_\_\_\_\_ Date: \_\_\_\_\_