## **BAY COUNTY DRAIN COMMISSIONER**

MICHAEL RIVARD rivardm@baycountymi.gov

515 CENTER AVENUE, SUITE 601 BAY CITY, MICHIGAN 48708-5127 drainoffice@baycountymi.gov PHONE (989) 895-4290 FAX (989) 895-4292 TDD (989) 895-4049 (HEARING IMPAIRED)

## APPLICATION FOR PERMIT TO TILE AN ESTABLISHED COUNTY DRAIN

The following information and specifications should be provided to your pre qualified contractors to assure that you, as landowner, receive quality products that are installed properly and will not be an impediment to the established county drain.

	approx. distance for closest intersection:
location:(address)	
	County Drain at the following
	olication for a permit for installation of a tile to be placed in the
Telephone Number:	()
Mailing Address:	
Contractor's Name:	
Parcel Code #:	
Telephone Number:	()
City, State, Zip:	
Mailing Address:	
Applicant's Name:	

I certify that I accept the following:

- 1. Installation contractors must be pre-qualified by the Bay County Drain Commissioner.
- 2. Commencement of work set forth in the permit application constitutes acceptance of the permit as issued.
- 3. Failure to object within ten (10) days to the permit as issued constitutes acceptance of the permit as issued.
- 4. I will be responsible for and pay all costs for engineering and inspection services incurred by the Bay County Drain Commissioner in reviewing this Permit Application and for all costs of inspection of the work thereunder.
- 5. The permit fee is \$300.00, which includes setting grade, culvert installation inspection and

final "as constructed" inspection. The fee is based on an eight hour work day and any additional services that are required will be billed at \$150.00 per half day and \$300.00 per full day. Overtime and holiday pay will meet the requirements of the Bay County Labor Agreements. Please make checks payable to the Bay County Treasurer and mail to this office.

- 6. All culverts must be of proper size and material set at the established drain bottom. New material to be used only.
- 7. Before setting the new drive culvert/tile the drain is to be excavated down to clay and stone bedding prepared at an elevation suitable for the type of pipe to be set to insure that the new structure meets the required elevation and grade.
- 8. Any structures removed such as headwalls, wingwalls, concrete slabs, rip rap, erosion protection, tiling and culverts metal or concrete, must be replaced with new material and reconstructed to original condition or better.
- 9. All ditch banks, when disturbed, must be reshaped to a minimum of 2:1 slope, compacted, topsoiled and seeded, fertilized and mulched or hydroseeded.
- 10. **Five (5) days notice** is required to the inspection department prior to any construction and final inspection request that will involve a county drain.
- 11. Equipment and materials may not be stored in any way so as to cause blockage of a county drain.
- 12. Permittee is responsible for maintaining all storm drainage during the time of construction, whether by use of pumping equipment or construction of a bypass system.
- 13. Depending on circumstances, prior to issuance of a permit, proof of Contractor's Liability Insurance should be filed with the Office of the Drain Commissioner, with the named insured, in compliance with the Bay County Drain Commissioner's standards.
- 14. This permit does not relieve applicant from meeting any application requirement of law or of other public bodies or agencies, i.e. local, state or federal.
- 15. Permittee shall hold harmless the Drainage District, the Bay County Drain Commissioner, or Drainage Board, County of Bay, and State of Michigan for any liability connected with installation of said tile.
- 16. Any failure of the work performed under this permit that causes an obstruction shall be subject to the provisions set forth under Section 280.421 of the Michigan Drain Code, Act 40 of 1956, as amended.

I hereby agree to comply with all terms and conditions as set forth in the permit, together with the rules and regulations as established by the Bay County Drain Commissioner:

DATE:		
	Applicant's Signature	