

APPLICATION FOR SECTION 401 WATER QUALITY CERTIFICATION

Cedar Estates Subdivision Stormwater Basin

North Royalton, Ohio

Prepared for:

City of North Royalton

14600 State Road

North Royalton, Ohio 44133



JANUARY 2016
CVE PROJECT NO. 15092



CVE CHAGRIN VALLEY
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Application for Section 401 Water Quality Certification

Division of Surface Water 401 Water Quality Certification and Isolated Wetland Permitting Unit

Section 1: Applicant and Agent Information		
	Applicant:	Agent:
Company/ Agency Name:	City of North Royalton	Chagrin Valley Engineering, Ltd.
Name of Contact:	Robert Stefanik	Larry Ludwig, PWS
Title:	Mayor	Project Manager
Technical Point of Contact:	Mark A. Schmitzer, P.E.	Erin Van Nort
Address:	11545 Royalton Road	22999 Forbes Rd, Suite B
City, State, Zip:	North Royalton, Ohio 44133	Cleveland, Ohio 44146
Phone Number(s):	(216) 731-6255	(440) 439-1999
Email Address:	mschmitzer@hovancsek.com	vannort@cvelimited.com

Section 2: Project Information		
A. Project Name: Cedar Estates Regional Detention Basin		
B Has Pre-App. Coordination occurred? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Indicate the 401 reviewer: Loucek DATE: 10/30/2014		
C. Brief Project Description/Purpose: To construct a regional stormwater basin		
D. Construction Timeframe (Provide ~start and end dates): March 2016 December 2016		
E. Is any portion of the activity complete now? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Is this an "After-The-Fact" permit application? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES to either, describe the extent of completed portion of the activity below and the unauthorized impacts on waters of the state: Click here to enter text.		
F. Coordinates (degree, minutes, seconds): 41°20' 51.12" N - 81° 45' 45.08" W		
G. Project Address: Street: Cedarwood Drive		City or Town: North Royalton
Zip Code: 44133		Township: Click here to enter text.
		County: Cuyahoga
H. 12 Digit HUC No.: 04110001 0202	I. Watershed Name: Rocky River	J. Corps District: Buffalo
K. Proposed impacts to "waters of the state": <input type="checkbox"/> Beach Nourish <input type="checkbox"/> Levees/Berms <input type="checkbox"/> Blasting <input type="checkbox"/> Mine Through <input type="checkbox"/> Breakwater <input type="checkbox"/> Revetment <input type="checkbox"/> Bulkhead <input type="checkbox"/> Bank Stabilization <input type="checkbox"/> Bridge/Culvert <input type="checkbox"/> Stream Channeliz. <input type="checkbox"/> Dam <input type="checkbox"/> Stream Relocation <input checked="" type="checkbox"/> Dredge <input type="checkbox"/> Water Body Cross <input checked="" type="checkbox"/> Fill <input type="checkbox"/> Weirs <input type="checkbox"/> Groin/Jetty <input type="checkbox"/> Other		L. Other water related permits issued or required include: <input checked="" type="checkbox"/> Individual 404 Permit – Public Notice # 2014-00144 <input type="checkbox"/> Nationwide Permit # Choose an item. Choose an item. Click here to enter a date. <input type="checkbox"/> Section 10 Permit - Choose an item. Click here to enter a date. <input type="checkbox"/> Section 9 Permit - Click here to enter text. <input type="checkbox"/> Iso. Wetland Permit Choose an item. Click here to enter a date. Choose an item. <input checked="" type="checkbox"/> NPDES Permit – General Will be Submitted 3/1/2016 <input type="checkbox"/> Permit to Install – Choose an item. : Click here to enter a date. <input type="checkbox"/> ODNR Choose an item. Permit - Choose an item. Click here to enter a date. <input type="checkbox"/> ODNR Coastal Permit - Choose an item. Click here to enter a date. <input type="checkbox"/> Regional Permit - Choose an item. Click here to enter a date.

Section 3: Fees

Application for Section 401 Water Quality Certification

Are you exempt from fees? YES NO (If YES, leave fee section blank)

Application Fee = \$ 200.00

Review Fee

Wetland	Acres Impacted	1.04	x \$500 =	\$ 520.00
Ephemeral Stream	Linear Feet Impacted		x \$5.00 =	\$ 0.00 (\$200.00 minimum)
Intermittent Stream	Linear Feet Impacted		x \$10.00 =	\$ 0.00 (\$200.00 minimum)
Perennial Stream	Linear Feet Impacted		x \$15.00 =	\$ 0.00 (\$200.00 minimum)
Lake	Cubic Yards		x \$3.00 =	\$ 0.00

Total Review Fees = \$ 520.00

Total Fees (\$200 Application Fee + Total Review Fees) = \$ 720.00

Standard Applicant - Is the fee cap (\$25,000) exceeded? YES NO

If YES, \$12,500 (\$12,700) is due with application and \$12,500 (\$12,300) is due at time of 401 WQC issuance

County, Township or Municipal Corp. - Is the fee cap (\$5,000) exceeded? YES NO

If YES, \$2,500 (\$2,700) is due with application and \$2,500 (\$2,300) is due at time of 401 WQC issuance

If fee cap is not exceeded:

DUE AT TIME OF 401 WQC APP. SUBMITTAL - APPLICATION FEE AND 1/2 OF REVIEW FEE = \$ 460.00

DUE AT TIME OF 401 WQC ISSUANCE - 1/2 OF REVIEW FEE (Invoice will be sent) = \$ 260.00

PLEASE MAKE FEE CHECK PAYABLE TO: "TREASURER, STATE OF OHIO"

Section 4: Submitted Documentation

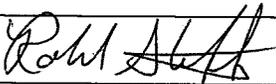
Check all documents/items that have been submitted:

<input checked="" type="checkbox"/> U.S. ACOE JD letter	<input checked="" type="checkbox"/> A specific & detailed mitigation plan	<input checked="" type="checkbox"/> US FWS & ODNR T&E Coordination
<input checked="" type="checkbox"/> 10 page ORAM forms - impacted wetlands	<input checked="" type="checkbox"/> Applicable fees	<input checked="" type="checkbox"/> Investigation report of "waters of the US"
<input checked="" type="checkbox"/> A DoEU for each undesignated stream *	<input checked="" type="checkbox"/> Site photographs	<input checked="" type="checkbox"/> US ACOE 404 Permit Public Notice
<input checked="" type="checkbox"/> Descriptions, schematics & appropriate economic information for all three alternatives (Preferred, Minimal Degradation and Non Degradation)		

*DoEU - Determination of Existing Use (See pages 6 and 11 in the Instructions)

Section 5: Applicant and Agent Signature

I hereby designate and authorize the agent/consultant identified in Section 1 to act on my behalf in the processing of this permit application, and to furnish, upon request, supplemental information in support of the application:

Applicant Name	Mayor Robert Stefanik	Applicant Signature	
Application is hereby made for a Section 401 Water Quality Certification. I certify that the information provided on this form and all attachments related to this project are true and accurate to the best of my knowledge:			
Applicant Name	Click here to enter text.	Applicant Signature	
Agent Name	Larry Ludwig, PWS	Agent Signature	

For Internal Ohio EPA Use

Reviewer:	
Project ID #	
Date Received:	
CR Due:	