

City of Suwanee  
330 Town Center Avenue  
Suwanee, GA 30024  
770-945-8996 (phone)  
770-945-2792 (fax)

# EROSION CONTROL AFFIDAVIT

**This affidavit must be signed and delivered to the City of Suwanee prior to issuance of a land disturbance permit.**

Permit Number \_\_\_\_\_ ( ) Clearing ( ) Grubbing ( ) Grading ( ) Development

Project Name and Phase/Unit \_\_\_\_\_

Job Site Address \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Name \_\_\_\_\_ Contact Phone \_\_\_\_\_

My signature hereon signifies that I am the person responsible for compliance with **The Soil Erosion and Sedimentation Control Ordinance**. I acknowledge that if I fail to comply, City inspection staff may: refuse to make inspections, cash or call the surety instrument, issue Stop Work Orders, and issue summons to appear in Municipal Court for violations of erosion control requirements; and that I must use Best Management Practices (BMP's) to control soil erosion on my job site.

My signatures hereon also signifies that I have posted the Erosion Control Surety per the requirements of **The Soil Erosion and Sedimentation Control Ordinance**. I also understand that failure to follow the City's requirements pertaining to soil erosion control my result in the City calling any or all sureties to remedy, correct or prevent any erosion-related problems or conditions.

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

Notary Signature \_\_\_\_\_ (Notary Seal)

Office Use Only  
Surety Tracking Number \_\_\_\_\_