

# STORMWATER PERMIT NAME/ OWNERSHIP CHANGE FORM (LSW103)



Town of Leland, North Carolina

102 Town Hall Dr., Leland, NC 28451  
www.townofleland.com

*Economic & Community Development*  
Phone 910-371-3390 Fax 910-371-1158

## I. CURRENT PERMIT INFORMATION:

1. Stormwater Management Permit Number: \_\_\_\_\_
2. Permit Holder's Name: \_\_\_\_\_
3. Signing Official's Name: \_\_\_\_\_ Title: \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

## II. NEW OWNER / PROJECT / ADDRESS INFORMATION:

1. This request is for: (please check all that apply)
  - Change in ownership of the property/company (Please complete Items #2, #3, and #4 below)
  - Name change of project (Please complete Item #5 below)
  - Mailing address change. (Please complete Item #4 below)
  - Other (please explain): \_\_\_\_\_
2. New owner's name to be put on permit: \_\_\_\_\_
3. New owner's signing official's name: \_\_\_\_\_ Title: \_\_\_\_\_
4. New Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_
5. New Project Name to be placed on permit: \_\_\_\_\_

**STORMWATER PERMIT NAME/OWNERSHIP CHANGE FORM**

THIS APPLICATION PACKAGE WILL NOT BE ACCEPTED BY THE STORMWATER MANAGEMENT DIVISION UNLESS ALL OF THE APPLICABLE ITEMS LISTED BELOW ARE INCLUDED WITH THE SUBMITTAL.

**REQUIRED ITEMS:**

1. This completed form.
2. Legal documentation of the transfer of ownership.
3. A copy of the recorded deed restrictions, if required by the permit.
4. The designer's certification, if required by the permit.
5. A signed Operation and Maintenance plan, if a system that requires maintenance will change ownership.
6. Maintenance records.

**CERTIFICATION MUST BE COMPLETED AND SIGNED BY BOTH THE CURRENT PERMIT HOLDER AND THE NEW APPLICANT IN THE CASE OF A CHANGE OF OWNERSHIP.**

FOR NAME CHANGES, COMPLETE AND SIGN ONLY THE CURRENT PERMITTEE'S CERTIFICATION.

**Current Permittee's Certification:**

I, \_\_\_\_\_, attest that this application for a name/ownership change has been reviewed and is accurate and complete to the best of my knowledge. I understand that if all required parts of this application are not completed and that if all required supporting information and attachments are not included, this application package will be returned as incomplete.

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

**New Applicant's Certification:** (Must be completed for all transfers of ownership)

I, \_\_\_\_\_, attest that this application for an ownership change has been reviewed and is accurate and complete to the best of my knowledge. I understand that if all required parts of this application are not completed and that if all required supporting information and attachments are not included, this application package will be returned as incomplete.

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

Mail the entire package to: Town of Leland Economic & Community Development  
Stormwater Management Division  
102 Town Hall Dr.  
Leland, NC 28451