



NOTICE OF TRANSFER OF OWNERSHIP STORMWATER CONTROL STRUCTURES

In accordance with the requirements of the Village of Clemmons' Stormwater Quality and Quantity Ordinances and Operation and Maintenance Agreement, this form is the official notification to the Village of Clemmons of the transfer of ownership of Stormwater Control Structure(s). This form must be submitted to the Village of Clemmons' Stormwater Administrator, after receiving an initial passing inspection by the Stormwater Administrator and no more than 10 days following the transfer of ownership.

PROPERTY INFORMATION:

Name of Project: _____

SWM Permit # _____

Address of Project: _____

PREVIOUS OWNER:

Name: _____

Address: _____

City, State, Zip _____

Phone: _____ Email: _____

NEW OWNER:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

I (we) certify under penalty of law that I (we) are the owner(s) of the transferred site and all the above information is correct and will be updated upon changing. I have been provided with a copy of the Stormwater Management Plans, Operation and Maintenance Agreement and Maintenance Plan for the Stormwater Control Structure(s) on this site. I (we) understand the operation and maintenance procedures established for the Stormwater Control Structure(s) and will implement these procedures.

New Owner Name (printed): _____

Signature: _____ Date: _____

IN WITNESS WHEREOF, this Agreement was executed in duplicate originals by DEVELOPER on the day and year first written above.

DEVELOPER/ PREVIOUS OWNER: _____

By (NEW OWNER): _____

I, _____, a Notary Public for the State of _____, County of _____, do hereby certify that _____ and _____ personally appeared before me this _____ day of _____, _____, and acknowledged the due execution of the above form.

Witness my hand and official seal,

SEAL

Notary

My commission expires _____

ACCEPTED BY:

Name:

Title: Stormwater Administrator, or designee

I, _____, a Notary Public for the State of _____, County of _____, do hereby certify that _____ personally appeared before me this _____ day of _____, _____, and acknowledged the due execution of the above form.

Witness my hand and official seal,

SEAL

Notary

My commission expires _____

Please sign and return this form to: Village of Clemmons
Stormwater Administrator
3800 Dillon Industrial Dr
Clemmons, N.C. 27012

Update: 1/2019