

ONCE FORM IS COMPLETED PRINT ON LANDSCAPE ARCHITECT LETTERHEAD

Date: _____

Re: Landscape Architect Certification

Sediment Control Permit No. _____

Project Name: _____

Dear DPS Staff,

I have recently inspected the stormwater management landscaping for the above-mentioned project, and I hereby certify that the landscaping in the field is in general accordance with the approved sediment control plans for this project. The required landscaping is generally healthy, vigorous, and free of disease. The layout and density generally conform to the intended design. The facility has been maintained recently and is free of significant weed growth.

I understand this certification is only valid for 60 days from the date of this letter, and that the DPS sediment control inspector may require an updated letter if the 60-day validation period has expired or if they believe the certification letter does not represent actual field conditions at the time of permit closure.

If you have any questions regarding these actions, please feel free to contact me by telephone at _____ or via email at _____.

Sincerely,

Signature: _____

Printed Name of Landscape Architect: _____

Registration Number: _____