

316 W. Main Street
Valders, WI 54245
920-773-2644

Town of Eaton

Witkowski Inspection Agency, LLC
621 Sixth St. P.O. Box 98
Kiel, WI 53042
witkoinspections@gmail.com

Erosion Control Application

Owner's Name _____

Address of Project _____

City/ Village _____ State _____ Zip _____

Phone # _____ Email _____

Contractor's Name _____

Address _____

City/ Village _____ State _____ Zip _____

Phone # _____ Email _____

Type of Erosion Control to be Installed _____ Separate Site Plan Included Yes _____

No _____

Silt Fence _____ Bales _____ Vegetation _____ Erosion Mat _____

I, the undersigned Owner/ Contractor, do hereby agree to comply with SPS 321.125 & 321.126 of the Wisconsin Department of Safety & Professional Services building code viewable at dps.wi.gov/sb/SB-DIVCodesListing.html

Signature of Homeowner _____ Date _____

or

Signature of Contractor _____ Date _____