



BERKELEY-CHARLESTON-DORCHESTER
COUNCIL OF GOVERNMENTS

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DATE:

TO: Berkeley-Charleston-Dorchester Council of Governments (payment is enclosed)

SUBJECT: Request for 208-plan conformance certification

Collection Systems =\$230 Treatment Systems =\$425 Other System Improvements =\$325

Residential Multiphase Projects (Phase 1) =\$230 All subsequent phases of Multiphase Project = \$175

Please review the following project and complete Section 10 and 11.

1. Project Name:

2. County:

3. General Location (see attached map):

4. Type of Action for Review: Construction Permit Request

5. Type of Project:

Number of Units:

6. Type of Waste

Volume (GPD):

7. Disposal Method:

8. Consulting Engineer (include phone number):

9. POTW Contact (include phone number):

10. This project (is) (is not) in conformance with the 208/201 Plan

11. Comments:

Signature of Certifying Officer

Date

Return with any attached comments to the following address:

NAME: _____

ADDRESS: _____

CITY: _____

PLANNING, PARTNERSHIP & PROSPERITY

5790 CASPER PADGETT WAY • NORTH CHARLESTON, SC 29406 • TEL 843.529.0400