



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF PLANNING & BUILDING

SWP-1003
06/08/2017

Private Stormwater System Owner, Agent, &
Designer Information

Condition Compliance Monitoring (CCM) Case Number
(CCM20##-#####)

Building Permit Number
(PMT20##-#####)

Project Address

SYSTEM OWNER:

Current Property Owner *(Include name of primary contact)*

Street Address

City

State

Zip Code

Phone Number

Owner Email:

SYSTEM DESIGNER:

Designer Name and Affiliation

Designer License Number and Type

Street Address

City

State

Zip Code

Phone Number

Designer Email:

Private Stormwater System Owner, Agent, & Designer Information

Condition Compliance Monitoring (CCM) Case Number
(CCM20##-#####)

Building Permit Number
(PMT20##-#####)

Project Address

PROJECT AGENT (if applicable):

Agent Name and Affiliation
(Include name of primary contact)

Street Address

City

State

Zip Code

Phone Number

Agent Email:

COORDINATING COUNTY REPRESENTATIVE:

County Representative *(Printed Name)*

County Representative Title

Email

Phone