



City of Albuquerque

Planning Department

Stormwater Control Permit for Erosion and Sediment Control

Project Title ABQ North Storage

Project Location (Major Cross Streets/Arroyo

or address) 5124 2nd St NW

Property Owner: (Note: If applying for a Building Permit, the “Company” or “Owner” name on this form must match the “Owner” name on the Building Permit.)

Company Name or Owner Name: David Murphy

Responsible Person: (Note: Name below may be the same as Owner Name above if there is no Company Name)

Name: David Murphy

Phone Number: 623-698-4003

E-mail: murprop7@gmail.com

Site Contact: (if different than Property Owner info above.)

Name: _____

Phone: _____

e-mail: _____

For City personnel use only:

Check boxes if plans/permit are approved:

☐ **ESC Plan** ☐ **Grading Plan** ☐ **Flood Plain Permit** (strike if not required)

City Personnel Signature: _____

(Rev February 2017)