Georgia Soil and Water Conservation Commission

Equivalent BMP Application

PATH A & PATH B

*This application will be processed in accordance with Appendix A-2 of the current Manual for Erosion & Sediment Control*

**Date**:

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Product Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manufacturer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email Address:

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax Number:

Address:

Street or P.O. Box City State Zip Code

Third party professional services information (\*Path B Only\*)

Represented by:

Contact Person: Email Address:

Phone Number: Fax Number:

Address:

Street or P.O. Box City State Zip Code

Product Description:

Material Composition (Generic description):

Identify the BMP Application (Must be a BMP practice from the Manual):

Bench test meets requirements of one of the two following specifications:

ASTM: or Overview Council Approved test

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**Dates of each NOI and NOT\* Filed:**

*\*A waiver of the NOT requirement can be requested from GSWCC if the BMP has completed a minimum 6-month duration of exposure and qualifying rainfall event exposure and the site will not reach eligibility in the next 45 days*

1.

2.

3.

1.

2.

3.

**Digital plan submittal (Date submitted to GSWCC):**

1.

2.

3.

**Three sets of the following shall be submitted (One for each time the alternative BMP was used):**

1. Alternative BMP Guidance documentation (See page A-2-1of Manual)
2. Notice of Termination (NOT)
3. BMP Certification Form including Level 2 and Level 1A or 1B signatures
4. Installation photos (photos must be labeled with dates taken and location)
5. After storm event photos (photos must be labeled with dates taken and location)
6. After storm event inspection records (include rainfall amount, and enforcement records made by any federal, state, or local entity)

Manufacturer/Supplier shall attach the following information to this form in order to substantiate, verify or clarify its contents:

* Specifications
* Drawings, sketches, pictures
* Installation instructions
* Material Safety Data Sheet
* Product/ Material literature
* Test data sheets

Manufacturer/Supplier shall submit a sample of the product with the application that is physically mailed or dropped off to the GSWCC/Urban Program.

Equivalent Product Application Checklist

* 1. Completed application
  2. Testing Documentation – ASTM/Overview Council Approved test
  3. Equivalent BMP information
  4. Product Specification sheets
  5. Product Sample

GSWCC may ask for additional information once the application has been submitted. Signature of preparer

***All the above information shall be submitted electronically by disk or thumb drive. The information must be labeled and categorized as per the above Equivalent Products Checklist. The information should be mailed or dropped off to the GSWCC Urban Program at the following location:***

***4310 Lexington Road***

***Athens, GA 30605***

***For more information contact the GSWCC Urban Program at (706) 552-4474.***

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*v.2022*