



Davison County Planning & Zoning
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Mitchell, SD 57301-2631
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Appendix A
DAVISON COUNTY DRAINAGE APPLICATION

I. Applicant(s): _____ **Permit (Parcel) Number:** _____

Name: _____ **Date Filed with Register of Deeds:** _____

Address: _____ **Date received:** _____

Phone: _____ **Email:** _____

Submitting Application to: Drainage Board Administrator for Administrative Approval

- NOTE:** This application must be accompanied by a detailed site plan, showing:
1. The location of the proposed drainage system; to include the inlet, outlet, & all drains.
 2. The direction of the water flow.
 3. The destination of water from the outlet, up to 1 mile.

Landowners affected will be notified by the Drainage Administrator. The Township Board Chairman will also be notified and a copy of this application will be attached. For Administrative Approval, provide waivers (Appendix B) from landowners ½ mile upstream, 1 mile downstream, and a ¼ mile buffer on both sides of the drainage area.

List of all landowners ½ mile upstream, 1 mile downstream, and ¼ mile buffer on both sides:

	NAME	ADDRESS	PHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

BY SIGNING THIS APPLICATION, AS OWNER OF RECORD OF THE FOLLOWING PARCEL OF LAND FOR A DRAINAGE APPLICATION, ALLOWS PERMISSION TO THE DESIGNATED DRAINAGE ADMINISTRATOR TO ENTER UPON THE FOLLOWING PROPERTIES, FOR THE PURPOSE OF INSPECTION AND OBTAINING INFORMATION FOR THE ADMINISTRATIVE OR DRAINAGE COMMISSION'S DECISION. (INITIALS _____)

II. Location

- Location of land to be drained:

_____ ¼ of the _____ ¼ of Sec _____ Twp _____ Rge _____ County _____
_____ ¼ of the _____ ¼ of Sec _____ Twp _____ Rge _____ County _____

- Location of outlet end of proposed drain:

_____ ¼ of the _____ ¼ of Sec _____ Twp _____ Rge _____ County _____

Name or description (if any) of any watercourse, lake, slough, draw, natural drain-way, stream, creek, river, drain or ditch that is involved in this application: _____

- Any structures unable to be altered in the drainage path: _____

III. Description of Proposed Drainage System:

Open Drainage Ditch

- Approximate size of area being drained (Acres): _____
- Elevation change from the inlet to the outlet (Feet): _____
- Bottom Width (Feet): _____
- Side Slope (Feet): _____
- Maximum Cut (Feet): _____
- Any boring under roadway: _____
- Explanation of Drain Design: _____

Closed Drainage Ditch (Underground drain tile)

- Approximate size of area being drained (Acres): _____
- Elevation change from the inlet to the outlet (Feet): _____
- Length of Solid Drain (Feet): _____
- Length of Perforated Drain (Feet): _____
- Total Length of all Drain (Feet): _____
- Diameter(s) of Drain (Inches): _____
- Any boring under roadway: _____
- Explanation of Drain Design: _____

Other Type of Drainage Ditch:

- Approximate size of area being drained (Acres): _____
- Elevation change from the inlet to the outlet (Feet): _____
- Any boring under roadway: _____
- Explanation of Drain Design: _____

IV. **South Dakota One Call Locate Date:** _____

V. **General Considerations:**

State any facts or reasons you believe are pertinent to the proposed drainage system that may assist the Administrator or Board in consideration of this application.

VI. **Required Signatures:**

If the drainage system allows water to enter a Road Right of Way, a signature from the appropriate Road Authority is also required. This includes Township, County, and State roads.

Road Authority Signature

Applicant/Owner Notarized Signature

STATE OF SOUTH DAKOTA)
) SS
 COUNTY OF DAVISON)

On this _____ day of _____, _____, before me, the undersigned officer, personally appeared _____, known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledge that __he__ executed the same for the purposes therein contained.

In Witness Whereof, I hereunto set my hand and seal.

(Seal)

Notary Public

My Commission Expires

VII. Administrator or Drainage Board Decision:

This Application to drain is hereby:

Approved

Disapproved

Date: _____

Attached hereto and incorporated herein are special conditions on this permit:

Planning & Zoning Administrator

Drainage Commission Chairperson

County Auditor

Appendix B

**WAIVER FOR PERFORMING DRAINAGE WORK
DAVISON COUNTY, SOUTH DAKOTA**

I, _____ of _____, am
(Upstream/Downstream/Buffer Property Owner) (Address)

aware of the proposed drainage work being proposed by _____
(Drainage Property Owner)

in the following location: _____
(Full Legal Description of Property, including Ditch name/number if known)

_____ and do not object to the drainage as proposed.

Additional Comments/Notes: _____

Signature: _____

Address: _____

City, State, Zip _____

Phone: _____

*Each upstream, downstream, or buffer property owner should complete a separate Appendix B form.