CERTIFICATE OF COMPLETION & COMPLIANCE			
Name of proje	ct:		
Address of pre	mises on which land alterat	tion was accomplished:	
Inspection Date(s): Stormwater Permit Number:			
Relative to pla	ns prepared by:	on	
Relative to plans prepared by: I hereby certify that:			(date)
1.	1. I am familiar with drainage requirements applicable to such land alteration (as set forth in the Stormwater Management Ordinance of the City of Vincennes); and		
2.	I (or a person under my direct supervision) have personally inspected the completed work and examined the drainage permit and its conditions, as-built plans, and final drainage calculations consistent with as-built conditions performed pursuant to the above referenced drainage permit; and		
3.	To the best of my knowledge, information, and belief, such land alteration has been performed and completed in conformity with all such drainage requirements, except		
Signature:		Date:	
Typed or Printed Name:		Pho	ne: ()
(SEAL)			
Business Addr	ess:		
SURVEYOR	ENGI (circle one)	INEER	
Indiana Regist	ration No		