



Serving **Beaufort • Colleton • Hampton • Jasper** Counties

Date:

To: Lowcountry Council of Governments

From:

Subject: Request for 208 Plan Conformance Certification (\$230 payment is enclosed)

Please review the following and complete sections 10 and 11.

1. Project Name:
2. County:
3. General Location: (include site map)
4. Type of Action:
5. Type of Project: (include number of units)
6. Type of Waste:
7. Disposal Method: (include volume (GDP) and treatment plant, or NPDES number for reissuance)
8. Consulting Engineer: (include name and phone number/email address)
9. SCDHEC/Agency: (include name and phone number/email address)
10. This project (is) (is not) in conformance with the 208/201 Plan.
11. Comments:

Signature of Certifying Officer and Title

Date

Return with any attached comments to the following address:

Name: _____

Address: _____

Enclosed Site Map and Check Number: _____

Lowcountry Council of Governments

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