

**CERTIFICATE OF COMPLETION OF BMP AND COMPLIANCE
WITH THE CITY OF GOLDSBORO STORMWATER MANAGEMENT
PROGRAM**

(Use one certificate for each BMP in the project)

PROJECT NAME: _____

PROJECT ADDRESS: _____

IDENTIFICATION OF INDIVIDUAL BMP: _____

STORMWATER PERMIT NUMBER (IF ASSIGNED): _____

I hereby certify that I, or a person under my direct supervision, inspected the BMP described above at the project site listed, and, to the best of my knowledge and information, the BMP has been constructed in accordance with the plans and specifications approved by the City of Goldsboro Department of Engineering unless noted below. I further certify that the BMP, as constructed, will operate and function as designed by me and as presented to and approved by the City of Goldsboro Department of Engineering, in accordance with the City of Goldsboro Stormwater Management Program.

Deviations from Plans and Specifications for the BMP identified above (if none so state): _____

Signature of North Carolina Professional Engineer: _____

Typed Name of North Carolina Professional Engineer: _____

North Carolina Registration Number: _____

Date of Certification: _____

(SEAL)