### WMO SCHEDULE R

Watershed Management Permit No

5

OFFICE OF THE RECORDER OF DEEDS OF COOK COUNTY

## NOTICE OF WATERSHED MANAGEMENT PERMIT REQUIREMENTS

AND OBLIGATIONS OF PERPETUAL MAINTENANG	CE & OPERATION		
		RHSP FEE:S9.00 RPRF FEE: \$1.00	
Name of Project: New Dentist Office	KAREN A.YARBROUGH		
Attach Legal Description		COOK COUNTY RECORDER OF DEEDS	
		DATE: 11/02/2018 12:38 FR	
A. NOTICE IS HEREBY GIVEN that the undersigned is (select one) (the look of the look of th		Truste	
(Name of Trust Holder)		(Official capacity) partnership),	
f Corporation), (a General Partner (Name of Corporation)	Corporation), (a General Partner Name of Corpo ation) (Name of Partner		
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	·	the record title holder of the property	
the record title holder of the processy or properties shown on the attended the coordation document and or record plans, attached hereto as Exhibit "Reveloped and built up for the benefit or "see of more than one owner of columnation District of Greater Chicago ("District") governing stormwater	R" and specifically incor or user, is subject to the	porated by reference herein; said property being rules and regulations of the Metropolitan Wate	
NOTICE IS FURTHER GIVEN that a Watershed Management Permi	it ("Permit") District Perm	nit No.: 17-205	
overing the project indicated and designated by the number shown above thibit "R", for the development and/or redevelopment and/or construction cuments on file with the District.	e) has been granted by the	District with respect to the property described in	
rpetual maintenance and operation by the co-permittee and / or the current rmit:	Applicab		
A) Volume Control Facilities	Yes Yes	□ No	
B) Detention Facilities (Existing and Proposed)	☐ Yer	■ No	
C) Offsite or Trade-off Detention Facilities	■ Yes	□ No	
D) Stormwater Management System(s) Component(s)	☐ Yes	· No	
E) Native Planting Conservation Area(s)	☐ Yes	■ No	
F) Compensatory Storage Area(s)	☐ Yes	■ No	
G) Wetland/Buffer Mitigation Area(s)	☐ Yes	■ No □ No	
H) Riparian Environment Mitigation Area(s)	☐ Yes	□ No	
Qualified Sewer Construction	■ Yes	□ No	
J) Other(Include attachments as necessary)		□ No	
THIS NOTICE, after it has been recorded, shall not be withdrawn, rescin perpetual maintenance and operation of facilities have been satisfied w			

after construction and as-built survey is complete and prior to RFI to obtain return on deposit. Submit one original and one copy of the executed and recorded Schedule R along with record drawings, maximum size 30"x 36". The information provided on the record drawings must be legible when it is recorded (microfilmed). All documents submitted for filing must comply with the Illinois Plat Act and additional requirements as set forth by the County Recorder of Deeds.

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\*Select all boxes as appropriate

RECORDING FEE

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WMO Schedule R (Continued) Watershed Management Permit No.

This notice is intended to be given to any party or parties hereinafter acquiring any interest in the aforedescribed property, or dealing with said property in any manner whatsoever, notifying them of the requirements for obligation of perpetual maintenance and operation for facilities for said property as provided herein. The owner hereby certifies that the property is recorded in the office of the Cook County Recorder of Deeds.

	d by owner and record title holder dated day of Nov 20 19			Impress
СНО	OOSE A. B. C. or D	- ( ) /		Corporate
A	(for individual owner)	<u> </u>	Owner	Seal Here
P	(for Partnership)		General Partn	
C	(for Limited Liability Company)	11) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Managing Me	
<del>D</del> -			President	411061
v	(for Corporation		Fresident Corporate Sec	nestant.
E	(for property in a b! trust)		<u> </u>	<del>ding power of di</del> rection
NOT provid	TE: (For individual, Partnership of Corporat	ARIZATION OF OWNER'S SIC ion) (if title to property is held in lan		must countersign in space
	OOSE A. B. C. D. or E. same as at over of Illinois	×		
	}			
Cour	nty of <u>Cook</u> ss.	0		
A	INDIVIDUAL OWNER	w acid County is the State of proceed DO U	EDEBY CERTIEV that	personally
	I, the undersigned, a Notary Public in and fo known to me to be the same person(s) who and acknowledged that (he) (she) signed, seal set forth, or, .	ose name (s) (is) (are) subscribed to the	foregoing instrument app	eared before me this day in person,
<u> </u>	PARTNERSHIP	4/2		
	I, the undersigned, a Notary Public in and for known to me to be a general partner of the whose name (s) (is) (are) subscribed to the sealed and delivered the said instrument as (h	e	aiership, personally know his aay in person, and ac	n to me to be the same person(s) knowledged that (he) (she) signed,
C	Limited Liability Company (LL	C)	0,	
	I, the undersigned, a Notary Public Christopher L. Schneider Managing I name is subscribed to the preceding instrument sealed and delivered the said instrument as MLLC, for the uses and purposes therein set for	Member of <u>Streamwood Smiles</u> nt as Managing Member, appeared before m Managing Member of the LLC, as (his) (her	,is personally knov a to this day in person, ard a	me to be the same person whose cknowledged that (he) (she) signed,
З	CORPORATION			
	I, the undersigned, a Notary Public in and for	r said County, in the State aforesaid, DO H	REBY CERTIFY that	CO
	Secretary of the corporation, are personally k and Secretary respectively, appeared before n and Secretary of the corporation, and afficorporation, as their free and voluntary act, as	nown to me to be the same persons whose r ne this day in person and acknowledged the ed the corporate seal of the corporation, p	nat they signed and deli- pursuant to authority give	vered the instrument as President n by the Board of Directors of the
	Given under my hand and official seal, this _day of <u>Nい</u> , 20 <u>[</u> 8			-
	Commission expiresO1O	, 20 <u>20</u> (Notary	Public)	OFFICIAL SEAL
E-	- LAND TRUST	COUNTERSIGNATU	(	DARLENE CONTURSI OTARY PUBLIC, STATE OF ILLINOIS OF COMMISSION EXPIRES 01/04/2020
		held by	(A)	<u> </u>
	(Trust Officer)	(Trust No.)	(Name of Truste	ee)

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# **UNOFFICIAL COPY**

## **WMO Schedule R**

**Watershed Management** Permit No. 17-205

### LEGAL DESCRIPTION

3 IN E.
PART OF THE.
JARTER OF SECTION STORY THE THIRD PROJECEMBER 30,1997, AS DOCU.
JOOK COUNTY, ILLINOIS

PROPERTY ADDRESS: 103 S. SUTTON ROAL,

PROPERTY INDEX NUMBER: 06-22-107-042 LOT 3 IN EMERALD HILLS COMMONS BEING A SUBDIVISION

## **UNOFFICIAL COPY**

# OVERSIZE

# EXHIBIT

3 pages Double

FORWARD ORIGINAL
DOCUMENT TO PLAT
COUNTER IMMEDIATELY
AFTER RECORDING FOR
SCANNING

PROPERTY ADDRESS: 103 S SUTTON ROAD, STREAMWOOD, IL TOTAL CONTIGUOUS OWNERSHE: 0.895 ACRES PROJECT AREA: 0.737 ACRES CONSERVATION AREA/DEED RESTRICTED AREA: 0.00 ACRES EGAL DESCRIPTION

ROJECT SITE SUMMARY

LOT 3 IN EMERALD HILLS COMMONS BEING A SUBDIVISION OF PART OF THE WEST HALF OF THE KORTHWEST QUARTER OF SECTION 22, TOWNSHIP 41 KORTH, BANGE 9 EAST OF THE THEIRD PRINCPAL MERDIAN RECORDED ON DECEMBER 30,1997, AS DOCUMENT NUMBER R97-981673 IN COOK COUNTY. **O&M GENERAL PRACTICE NOTES** 

SIGNIFICANT RAINFALL EVENTS EXCEEDING 1.5 INCHES.

THE OWNER SHALL KEEP AN UPDATED LOG BOOK DOCUMENTING THE PERFORMANCE OF THE REQUIRED OM ACTIVES FOR PERPETUITY, LOG BOOKS MUST BE PRODUCED UPON REQUEST OF A CITY INSPECTOR. VOLUME CONTROL BMPS (INFILTRATION TRENCHES, PERMEABLE PAVEMENT ETC.) SHALL BE INSPECTED SEMI-ANNUALLY AND AFTER AND CLEANED SEMI-ANNUALLY

DRAINAGE STRUCTURES AND FLOW RESTRICTORS MUST BE INSPECTED O&M PLAN PROCEDURES AND PRACTICES MUST BE REVIEWED AND

VEGETATION SHALL BE MAINTAINED ON A REGULAR BASIS.
UNDERGROUND VAULTS MANIFOLD SYSTEMS MUST INCLUDE DESIGN
MEASURES TO FACULITATE CLEANING AUN MANITEMANCE. CONFINED
SPACE SAFETY PROCEDURES MUST BE FOLLOWED. EMPLOYEE TRAINING: SPECIFIC INDIVIDUALS SHOULD BE ASSIGNED RESPONSIBILITY FOR OAM OF ALL ONSITE BMPS. EMPLOYEE TRAINING SHOULD BE CONJUCTED SO THAT THESE INDIVIDUALS ARE AWARE OF PROPER INSPECTION AND OAM PROCEDURES. ALL PERSONNEL SHOULD PROPER INSPECTION AND O&M PROCEDURES. ALL PERSONNEL SHEEF FAMILIAR WITH THE COMPONENTS OF THE O&M PLAN AND THEIR

# SANITARY SEWER MAINTENANCE PLAN

LOT 2

AS NEEDED

• AVOID DRAINING HEAVY GREASE IN TO THE DRAINS.

INSPECT AND CORRECT OR ROD SANITARY SEWERS FOR ANY CLOGS OR BREAKAGE, LEAKS OR ROOT PENETRATIONS.
INSPECT AND CLEAN INSPECTION MANHOLE FOR ANY DEPOSITS OR CLOGGING.

# ACTIVITY SCHEDULE (UNDERGROUND DETENTION SYSTEMS)

UNDERGROUND VAULTS MUST BE DESIGNED SO THAT THE VAULT CAN HAVE EASY ACCESS FOR INSPECTION AND MAINTENANCE. VAULT MAINTENANCE PROCEDURES MUST MEET OSHA CONFINED SPACE ENTRY REQUIREMENTS, WHICH INCLUDE CLEARLY MARKING ENTRANCES TO CONFINED SPACE AREAS, THIS MAY BE ACCOMPLISHED BY HANGING A REMOVABLE SIGN IN THE ACCESS RISER(S), JUST UNDER THE ACCESS LID.

\* REMOVAL OF SEDIMENT AND DEBRIS FROM SUBSURFACE YAUT SEDIMENTATION CHAMBER WHEN THE SEDIMENT ZOUE IS FULL AS WELL AS FROM MILET AND OUTLET PIPES, SEDIMENTS SHOULD BE TESTED FOR TOXICANTS IN COMPLIANCE WITH APPLICABLE DISPOSAL REQUIREMENTS IF LAND USES IN THE CATCHMENT INCLIDE COMMERCIAL OR INDUSTRIAL ZONES, OR IF INDICATIONS OF

COPIES THE WAY SEED WHITTED

63

MILLAGÉ EASEMENT

£33

- 10' UTILITY AND

S78°36'20"E 127.08'

> FOUND 0.21'S 5/8" IRON ROD AND ON LINE

RECORDING

AG AU

OWNER IS RESPONSIBLE FOR ALL MAINTENANCE

ONCE PER YEAR + INSPECTION OF SUBSURFACE VAULT AND CONTROL

FLOATING DEBRIS SHOULD BE REMOVED.

306120 61

PROPOSED UNDERGROUND
PERFORATED CMP VOLUME
CONTROL STRUCTURE

**LOT 66** 

DETENTION BASIN 2 \$14°21'53"W HITUMINIOUS PAVEMENT 188.34 PAVENENT CONNECTION RESS AND EGRESS SED SANITARY (3) PROPOSED: PROPOSED ROOF DRAINS 148.94 UTILITY GE EAST -814°21'53"W 201.00 EMERALD HILLS PHASE 1 SUBDIVISION **LOT 65** 5 BC **EXHIBIT R** NEW DENTIST OFFICE 103 S SUTTON ROAD, STREAMWOOD, IL. PH: (331) 229-351 FAX: (847) 823-330