

BOROUGH OF PARKESBURG 315 West First Avenue Parkesburg, PA 19365 (610) 857-2616 Fax (610) 857-1102	Appl. No. _____ Amt. \$ _____ Rec. _____ Date _____
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APPLICATION FOR STORMWATER MANAGEMENT PERMIT

1. PERMIT REQUEST INFORMATION

Application Date		
Applicant is also Property Owner <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Permit <input type="checkbox"/> Erosion and Sedimentation Control Plan Permit <input type="checkbox"/> Stormwater Management and Drainage Plan Permit <input type="checkbox"/> Stream Reconnaissance Report Permit <input type="checkbox"/> Construction Review Report Permit <input type="checkbox"/> As-built Drainage Plans Permit <input type="checkbox"/> Remediation Report Permit <input type="checkbox"/> Stream Monitoring Report Permit <input type="checkbox"/> Stormwater Facilities Performance Report Permit <input type="checkbox"/> Illicit Discharge Report Permit	<input type="checkbox"/> Exemption <input type="checkbox"/> Waiver

2. PROPERTY INFORMATION

Street Address		Tax Parcel Number	Zoning District
Parcel Use	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input type="checkbox"/> Other	Lot No. (if applicable) Subdivision (if applicable)

3. PROPERTY OWNER INFORMATION

First Name	Last Name	Phone No.	
Business Name (if applicable)		Fax No.	
Street Address	City	State	Zip
e-mail Address			

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4. APPLICANT INFORMATION (if different from property owner)

First Name	Last Name	Phone No.	
Business Name (if applicable)		Fax No.	
Street Address	City	State	Zip
e-mail Address			

5. CONTRACTOR INFORMATION

Responsible Contact Person	Phone No.		
Business Name		Fax No.	
Street Address	City	State	Zip
e-mail Address			
<input type="checkbox"/> Contractor has not been selected at time of application; contractor information will be provided before issuance of permit. <input type="checkbox"/> There will be no contractor; the applicant will be performing the work.			

6. SUBCONTRACTOR INFORMATION (if different from contractor)

First Name	Last Name	Phone No.	
Business Name (if applicable)		Fax No.	
Street Address	City	State	Zip
e-mail Address			
<input type="checkbox"/> Subcontractor has not been selected at time of application; subcontractor information will be provided before issuance of permit. <input type="checkbox"/> There will be no subcontractor; the responsibility for the permit related work will be assumed directly by the contractor.			

7. DESCRIPTION OF PROPOSED DEVELOPMENT AND PROPOSED USES

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8. DESCRIPTION OF PERMIT RELATED ACTIVITIES

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9. APPLICABLE CONSTRUCTION ACTIVITIES

Proposed Maximum Area of Temporary Earth Disturbance (square feet)
Area of Impervious Coverage Existing Before June 12, 2006 (square feet)
Existing Area of Impervious Coverage (square feet)
Proposed New Impervious Coverage (square feet)
Total (existing plus proposed new) Impervious Coverage (square feet)
Total Area of Property (square feet)
Proposed New Area of Infiltration (square feet)
Proposed New Volume of Detention (cubic feet)
Estimated Time Duration of Construction

	A check in this box denotes that the applicant has checked the area quantities provided above for all impervious coverages, and states, to the best of his or her knowledge, that all quantities provided are accurate.
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10. PROPERTY OWNER CERTIFICATION

APPLICATION is hereby made to the Borough of Parkesburg for the issuance of the Stormwater Management Permit(s) as indicated in the foregoing. Accompanying this application is the necessary documentation as required by the Borough of Parkesburg Stormwater Ordinance. I hereby state that I am the owner of record of the subject property, and that the proposed work is authorized by me. I hereby state that I have familiarized myself with the Borough of Parkesburg Stormwater Ordinance, that I understand my responsibilities under the regulations of the Borough of Parkesburg Stormwater Ordinance, and that I agree to comply with all provisions of the Borough of Parkesburg Stormwater Ordinance. I also understand my obligations related to follow-up activities associated with construction review reporting, "as-built" drainage plans, remediation reporting, performance reporting of stormwater facilities, applicable stream reconnaissance reports, applicable stream monitoring reports, and illicit discharge reporting. I understand that if I knowingly make false statements herein, I am subject to such penalties as may be prescribed by law and ordinance.

Applicant's Name	Address	Phone No.
Applicant's Signature	e-mail Address	Fax No.

11. PROFESSIONAL-OF-RECORD CERTIFICATION

APPLICATION is hereby made to the Borough of Parkesburg for the issuance of the Stormwater Management Permit(s) as indicated in the foregoing. Accompanying this application is the necessary documentation as required by the Borough of Parkesburg Stormwater Ordinance. I hereby state that I have familiarized myself with the Borough of Parkesburg Stormwater Ordinance. I hereby state that the proposed work as shown on the plans and supplement documentation, for which I am responsible, comply fully with the Borough of Parkesburg Stormwater Ordinance. I hereby state that issues of non-conformance, including omissions, with any and all provisions of the Borough of Parkesburg Stormwater Ordinance have been individually identified, itemized, and the associated request for waiver(s) submitted as part of this application. As the professional-of-record, I understand my responsibilities under the regulations of the Borough of Parkesburg Stormwater Ordinance, and agree to comply with the Borough of Parkesburg Stormwater Ordinance during all pre-construction, construction, and post-construction phases.

Professional-of-Record's Name	Address	Phone No.
Professional-of-Record's Signature	e-mail Address	Fax No.

12. CONTRACTOR CERTIFICATION

APPLICATION is hereby made to the Borough of Parkesburg for the issuance of the Stormwater Management Permit(s) as indicated in the foregoing. I hereby state that I have familiarized myself with the Borough of Parkesburg Stormwater Ordinance, and agree to comply with all requirements of this application and all provisions of the Borough of Parkesburg Stormwater Ordinance, including the implementation of all work by my workforces and my subcontractors. I hereby state that all unforeseen erosion and sedimentation controls will be implemented as expediently as possible in order to prevent adverse environmental impacts.

Contractor's Name	Address	Phone No.
Contractor's Signature	e-mail Address	Fax No.

<input type="checkbox"/>	A check in this box denotes that the application submission has been reviewed by the applicant for completeness, and the application submission is complete, including those relevant requirements of Sections 106, and 301 through 311 of the Borough of Parkesburg Stormwater Ordinance.
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NOTES: Applications shall be signed and accompanied by three sets of all documentation (plans, reports, etc). The applicant shall be responsible for municipal review fees by Borough agents, consultants, and counsel, in accordance with the Borough of Parkesburg Stormwater Ordinance. This application under the Borough of Parkesburg Stormwater Ordinance shall not be construed as a substitute or waiver from requirements to conform to other applicable federal, state, and local laws and regulations. Incomplete applications will not be processed.