



5186 Stump Road
Box 387
Plumsteadville, PA 18949
215-766-8914
FAX – 215-766-9831

PLUMSTEAD TOWNSHIP STORMWATER MANAGEMENT PLAN APPLICATION

A completed application form and fee must be submitted with three (3) copies of required associated plans, and documents to Plumstead Township Municipal Building, 387, Plumsteadville, PA 18949-0387.

Date: _____ Tax Map Parcel No.: _____

Name of Development: _____

Name of Applicant: _____ Telephone No. _____

Email: _____

Mailing Address: _____

Name of Property Owner: _____ Telephone No. _____

Email: _____

Mailing Address: _____

Name of Design Engineer: _____ Telephone No. _____

Email: _____

Mailing Address: _____

Type of development proposed: ____ Residential ____ Industrial ____ Commercial ____ Other

Total parcel size _____ Acres Total amount of new impervious surface _____ Square Feet

Minimum distance between proposed impervious surface and nearest downstream property boundary
_____ Feet

Exemption of Stormwater Management Ordinance Requirements requested? _____ Yes _____ No

Checklist of Stormwater Management Plan Requirements:

_____ Three (3) copies of plan (signed and sealed by responsible engineer).

_____ Three (3) copies of stormwater narrative and calculations (signed and sealed by responsible engineer).

_____ Three (3) copies of onsite soil test results (certified by responsible soil scientist) for feasibility of use infiltration stormwater management facilities.

_____ Three (3) copies of the “Engineer’s Opinion of Probable Cost” for use in determining of the Performance Guarantee.

I hereby certify that to the best of my knowledge, the above information is true and correct.

Signature: _____
Applicant or Agent for Applicant

Date: _____

To be completed by the Township

Date Application received: _____

Permit filing fee: \$ _____

Escrow: \$ _____

Township Account # _____

Received by: _____