

# Bridgeton Township Supervisors

P. O. Box 200

Upper Black Eddy, Pennsylvania 18972

## BRIDGETON 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 Bridgeton Township Municipal Building, P.O. Box 200, 1370 Bridgeton Hill Road, Upper Black Eddy, PA 18972

Date: \_\_\_\_\_

Name of Development: \_\_\_\_\_

Tax Map Parcel No.: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Design Engineer: \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Type of development proposed: \_\_\_\_\_ Residential \_\_\_\_\_ Industrial \_\_\_\_\_ Commercial \_\_\_\_\_ Other

Total parcel size \_\_\_\_\_ AC

Total amount of new impervious surface \_\_\_\_\_ SF

Minimum distance between proposed impervious surface and nearest downstream property boundary –  
\_\_\_\_\_ FT

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).

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

\_\_\_\_\_ Three (3) copies of the "Engineer's Opinion of Probable Cost" for use in determining 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: \_\_\_\_\_

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To be completed by the Township

Date application received: \_\_\_\_\_

Permit filing fee: \$ \_\_\_\_\_

Escrow: \$ \_\_\_\_\_

Township Account # \_\_\_\_\_

Received by: \_\_\_\_\_