

LONDONDERRY TOWNSHIP

STORMWATER MANAGEMENT APPLICATION

Part I (to be completed by Township)

Date Application Received _____ Received by (initials) _____ Twp.
Identification No. _____

Type of Plan:

Exemption _____
Minor Stormwater _____
Major Stormwater _____

Fees Paid:

See Fee Schedule - Resolution No.

Submission \$ _____
Escrow \$ _____

Part II (to be completed by Applicant)

Plan Sent to Chester County Conservation District (NPDES permits only) on
_____ (Date)

CCCD Response Received on
_____ (Date)

1. Applicant: Name _____ Telephone No. _____
Address _____

2. Owner of Record (if corporation, list corporation's name and address, and
names of two officers):

Name _____ Telephone No. _____
Name _____ Telephone No. _____
Address _____

3. Agent or Attorney: Name _____ Telephone No. _____
Address _____

4. Engineer or Surveyor: Name _____ Telephone No. _____
Address _____

5. To whom should official notice/invoices for this submission be sent to?
Name:
Address: _____

6. Total proposed impervious to be added as part of this project:
_____ square feet

7. Total proposed earth disturbance as part of this project:
_____ square feet

8. Total impervious area added (cumulative) since September 1, 2014:
_____ square feet

Part III (to be completed by Applicant/Engineer)

The Undersigned represents that to the best of his or her knowledge, all the above statements are true, correct and complete. I/We hereby authorize members of Londonderry Township Boards, commissions and staff to enter the lands proposed for stormwater management for site inspections, if necessary. Further, I/we and my/our successor(s) in this application agree to reimburse the Township of Londonderry for such fees and expenses as said Township may incur for engineering, legal services and administrative fees in reviewing and advising the Board of Supervisors and Planning Commission with respect to this application. Further, I/we agree to provide all filing fees and escrow deposits as established by Resolution of the Board of Supervisors.

Date:

Signature of Owner of Record/Applicant/Agent
(Print Name and Sign)

