

Township of Springfield

DELAWARE COUNTY, PA



DEPARTMENT OF LICENSES AND INSPECTIONS

50 POWELL ROAD, SPRINGFIELD, PA 19064-2446

(610) 544-1300 FAX (610) 544-5780

Storm Water Management Permit

Permit Number: _____

Application is hereby made for review of the SWM Site Plan and related data as submitted herewith in accordance with the Springfield Township Storm Water Management Ordinance

Plans – Two sets of plans are required at time of submission

Simplified Plan \$600.00

New/Replacement Impervious Coverage
(Between 500 ft² and 999 ft²)

_____ ft²

Full Plan \$1,600.00

New/Replacement Impervious Coverage
(1,000+ ft²)

_____ ft²

Description of Work: _____

Total Area (acres or square feet) _____

Purpose or Intent of Land Disturbance: _____

Other Properties: Does work back up or discharge water on or affect any other property in any way?

Yes _____ No _____ If yes, note property address affected and to what extent: _____

Schedule of Work: Start Date: _____ Completion Date: _____

Permit Terms and Conditions:

1. I agree that I will comply with all Ordinances, laws and Township polices regulating grading, land disturbance, erosion/sedimentation control, and storm water management.
2. I agree to allow access to said activates for inspection by Township of Springfield Code Officer and Engineer.
3. All erosion/sedimentation control measures will be installed before land disturbance activities begin and be properly maintained throughout the grading/land disturbing activities. I further agree to add any additional erosion/sedimentation control measures as requested by Springfield Township
4. I agree that I will be responsible for any damage to any utilities, public right-of-way and city streets caused by this work.
5. Permit fee covers one (1) hour Engineer review time, one (1) site visit by code officer and administrative costs. I agree to pay for additional engineering review fees and site visits as required.

Signature of Applicant: _____ Date: _____