

FRANKLIN TOWNSHIP, CHESTER COUNTY
STORMWATER PERMIT APPLICATION

Tax Parcel No.:	For Township Use:
	Date of Receipt:
	Fee Received:
Name of Property Owner(s): Address: <div style="display: flex; justify-content: space-between;"> Zip: Phone: </div> E-mail address (optional): <div style="display: flex; justify-content: space-between;"> City: Cell: </div>	
Name of Contractor: Street Address: <div style="display: flex; justify-content: space-between;"> City: Zip: Phone: </div> E-mail address (optional):	
Name of Architect/Engineer/Surveyor: Company; Street Address: <div style="display: flex; justify-content: space-between;"> City: Zip: Phone: </div> E-mail address (optional):	
Project Location and Address (may state same as owner):	
Proposed Earth Disturbance (in acres or square feet):	
Proposed Impervious Surface (in acres or square feet): impervious includes paving, buildings, compacted gravel areas etc.	
Subdivision or land development plan if applicable Plan name: Plan date:	
Brief Description of Proposed Work:	
The undersigned hereby represents that, to the best of their knowledge and belief, all information listed above and contained within the submittal provided is correct and complete. I hereby agree to accept and abide by the Stormwater Permit provisions, the conditions of approval pertaining to this permit (if any) and Franklin Township Ordinances. Signature of Applicant: Date:	
REQUIRED INFORMATION:	
<ol style="list-style-type: none"> 1. Upon submittal, this application, with all required information, signed by the applicant 2. Upon submittal, Three (3) copies of the proposed Stormwater Management Plan 3. Once Stormwater Plan is approved, two (2) signed & notarized copies of the approved Operations & Maintenance Agreement and 2 copies of the approved Stormwater Plan 	