

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;"> 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 SUBMITTAL INFORMATION:	
<ol style="list-style-type: none"> 1. This application, with all required information, signed by the applicant 2. Three (3) copies of Minor SWM BMP Worksheets & Site Sketch Plan or Stormwater Mgmt. Plan 3. Two (2) signed, notarized copies of the Operations & Maintenance Agreement 	