

# STORMWATER MANAGEMENT APPLICATION

**TINICUM TOWNSHIP**  
 BUILDING & ZONING DEPARTMENT  
 163 MUNICIPAL ROAD  
 PIPERSVILLE, PA 18947  
 610-294-8076  
 FAX: 610-294-9889  
 WWW.TINICUMBUCKS.ORG



Permit #:	Zoning Permit Fee:	
Property Address:	\$50 App Review Fee Rcvd:	-
Parcel # 44-	Total Fee Due:	

## Part I: GENERAL INFORMATION

Property Owner	Name		Primary Contact <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address		
	Contact Phone#	Email	
Engineer/Surveyor	Name		Primary Contact <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address		
	Contact Phone#	Email	
Agent	Name		Primary Contact <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address		
	Contact Phone#	Email	

## Part 2: PURPOSE AND PROPOSED METHOD OF RUNOFF CONTROL (Check all that apply)

Reason for Grading:

Method of Runoff Control (Check all that apply)

Swale  Infiltration/Seepage Pit  Pond  Detention Basin  Other:

## Part 3: PROPERTY DESCRIPTION

Check All Overlays & Restrictions That Apply:

Critical Biodiversity Area  Critical Recharge  Delaware Wild & Scenic  Farmland/Ag Soils  Flood Plain  
 Riparian Buffer  Scenic Resources  Steep Slopes  Wetlands  Woodlands  Watershed  
 Conservation Easements  Deed Restrictions  Other:

Impervious Areas:

Existing: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ % of Lot

Proposed: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ % of Lot

Total: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ % of Lot

**Part 4: COMPLETE APPLICATION PACKAGE SUBMISSION LIST**

- 3 Copies of the Plot Plan or Grading Plan and details prepared by a registered surveyor or professional engineer.
- Construction Schedule
- Bucks County Conservation District Letter of Approval
- Wetland Delineation (if applicable)
- Watercourse Map (if applicable)

**Part 5: GENERAL PROVISIONS (Applicant/Owner Acknowledgement)**

*Please initial and acknowledge the following:*

- \_\_\_\_\_ No application shall be accepted unless the plans have been prepared by a Registered Engineer or Surveyor and all required fees have been paid to the Township.
- \_\_\_\_\_ No work of any kind may start until all necessary permits are issued.
- \_\_\_\_\_ I am required to complete the work within 1 year of the date specified on the actual Permit. If I fail to complete this work by the time specified, it is my responsibility to notify the Township and apply for a written extension.
- \_\_\_\_\_ I give consent to the Local Administrator or his/her representative making any necessary inspections required to determine and/or verify compliance.
- \_\_\_\_\_ Other permits may be required prior to development to fulfill local, state, and federal regulatory requirements.
- \_\_\_\_\_ I certify that all statements herein and in attachments to this application are, to the best of my knowledge, true and accurate. I agree to abide by all rules and regulations contained in the Tinicum Township Zoning Ordinance and understand that my permit may be revoked if any false statements are made herein.
- \_\_\_\_\_ I certify that I am authorized to make this application on behalf of the property owner.

Signature of Applicant

Date

Signature of Owner of Record

Date

Surveyor/Engineer/Landscape Architect

Date

**FOR OFFICE USE ONLY:**

ZONING APPROVED: \_\_\_\_\_ Date: \_\_\_\_\_

ENGINEER APPROVED: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION DENIED: \_\_\_\_\_ Date: \_\_\_\_\_

COMMENTS/CONDITIONS: