



OFFICIAL USE ONLY
ID # _____
Date Received _____

**PERMIT APPLICATION
UNDER THE EROSION AND SEDIMENT POLLUTION CONTROL PERMIT**

PLEASE READ THE PERMIT SUMMARY SHEET AND INSTRUCTIONS PROVIDED IN THIS PERMIT APPLICATION PACKAGE BEFORE COMPLETING THIS FORM. COMPLETE THE ATTACHED CHECKLIST AND APPROPRIATE WORKSHEETS.

PLEASE PRINT OR TYPE INFORMATION IN BLACK OR BLUE INK.

APPLICATION TYPE NEW RENEWAL MAJOR MODIFICATION PHASED

SECTION A. APPLICANT INFORMATION

Corporations for profit, corporations not-for-profit, limited liability companies, partnerships or sole proprietorships, limited partnerships, professional associations and business or statutory trusts that were not created or formed under the laws of Pennsylvania desiring to do business in this Commonwealth must register with the Pennsylvania Department of State.

Applicant Name	Phone	FAX
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Mailing Address	City	State	ZIP + 4
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Employer ID (EIN) _____

Email Address _____

Co-Applicant's Name	Phone	FAX
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Mailing Address	City	State	ZIP + 4
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Employer ID (EIN) _____

Email Address _____

SECTION B. PROJECT INFORMATION

1. Project Name: _____

2. Total Project Site (Acres): _____	3. Total Disturbed Area (Acres): _____
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4. Project Description

Road Maintenance Timber Harvesting Other: _____

5. Project Location or Physical Address (if available):

Address	City	State	ZIP + 4
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6. Project County	Project Municipality	City	Boro	Twp
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Project Latitude: _____° / _____' / _____" Project Longitude: _____° / _____' / _____"

7a. Collection Method: EMAP HGIS GISDR ITPMP GPS WAAS LORAN

7b. Horizontal reference datum (or projection datum) employed in the collection method. (EMAP and HGIS (PNDI) have known datum and do not require checking here.) NAD27 NAD83 WGS84 (GEO84)

Enter the date of collection if the lat and long coordinates were derived from GPS, WAAS or LORAN. _____ mm _____ dd _____ yyyy

8. U.S.G.S. Quad Map Name(s) _____

SECTION C. SITE ANALYSIS

1. Existing and Previous Uses of the Project Site:

1a. Existing Land Uses: Agriculture ____ % Forest/Woodland ____ % Barren ____ %
 Urban ____ % Brownfield ____ % Other _____ %

1b. Historical Land Uses: Agriculture ____ % Forest/Woodland ____ % Barren ____ %
 Urban ____ % Brownfield ____ % Other _____ %

2. Potential Toxic or Hazardous Pollutants:

Pollutant	Concentration w/Units	Source	Sample Type	Date(s) / Number of Samples

3. Fill Material

Will the applicant need to import or export fill for the project site? Clean fill can not be placed in or on waters of the Commonwealth. If fill will be imported or exported, Form FP-001 (Document # 258-2182-773) must be used to certify origin of the fill material.

Check the appropriate box

Import fill – the applicant will, in most situations, be responsible to perform environmental due diligence and determine that all fill imported to the site meets the department’s definition of clean fill. The plan designer must include a note on the drawings to identify the operator(s) responsibility and provide the definition of Clean Fill and Environmental Due Diligence.

Export fill – the Applicant is responsible for performing environmental due diligence at the time this application was submitted to determine that any fill exported from the site will be certified as clean fill.

Balance all cuts and fills with the amount of rock and soil available on the site.

4. Estimated Timetable for Phased Projects (Complete for phased projects only)

Phase No. or Name	Proposed Type of Activity	Total Area	Disturbed Area	Start Date	End Date

5. Waters to Which Project Discharges (Check all that apply)

Waters of the Commonwealth Municipal Separate Storm Sewer (MS4) Private Storm Sewer
 Combined Sewer Overflow System Non Surface Waters

5.a. Waters of the Commonwealth to which the project discharges (including EV wetlands) other than MS4s, CSOs, private storm sewers:

Name of Waters	Designated Use of Water	Existing Use of Water
_____	_____	_____
_____	_____	_____

<input type="checkbox"/> Combined Sewer Overflow System:	<input type="checkbox"/> Municipal Separate Storm Sewer (MS4) to which the project drains:	<input type="checkbox"/> Private Storm Sewer to which the project drains:	<input type="checkbox"/> Non Surface Waters: (including off-site discharges)
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5b. Does the site discharge to waters classified as impaired according to Category 4 of PA Integrated Water Quality Monitoring and Assessment Report? Yes No

If yes, list source and cause of impairment: _____

5c. Does the site discharge to waters with a TMDL according to Category 5 of the PA Integrated Water Quality Monitoring & Assessment Report? Yes No

If yes, list source and cause of impairment TMDL addresses: _____

**SECTION D. EROSION & SEDIMENTATION (E & S) AND POST CONSTRUCTION
STORMWATER MANAGEMENT (PCSM)**

Note: For projects involving multiple points of discharge, please submit a complete, separate Section D for each additional point of discharge.

1. E & S Plan The E & S Plan must satisfy at least one of subparagraph A or B below.
- A. E & S plan is designed using BMPs in the Pennsylvania Erosion & Sedimentation Pollution Control Manual (ESPC) (Technical Guidance #3632134-008/March 2012)
- OR**
- B. E & S plan is designed using an alternative BMP or design standard

2. PCSM/Site Restoration Plan
- The PCSM Plan must satisfy either subparagraph A, or B **or** C below.

- A. Act 167 Plan approved on or after January 2005 – The attached PCSM/Site Restoration Plan, in its entirety, is consistent with all requirements pertaining to rate, volume, and water quality from an approved Act 167 Stormwater Management Plan.

Complete the following table for all applicable approved Act 167 Stormwater Management Plans. (use additional sheets if necessary)

ACT 167 Plan Name	Date Adopted	Consistency Letter Included <input type="checkbox"/>
		Consistency Letter Pending <input type="checkbox"/>

OR If the PCSM plan is consistent with a DEP approved Act 167 plan from 2005 or later and the Act 167 plan is without variance consistent with the standard design criteria from the 25 Pa. Code Chapter 102.8(g)(2) and (3) then utilizing worksheets 1-5 and the summary table for supporting calculation and measurement data are recommended, otherwise check the applicable box(es) in Section D.3.

- B. The PCSM/Site Resroation Plan meets the standard design criteria from the 25 Pa. Code Chapter 102.8.(g)(2) and (3).

OR

- C. Alternative Design Standard – The attached PCSM/Site Restoration plan was developed using approaches other than those in 25 Pa. Code Chapter 102.8.(g)(2) and (3). Demonstrate how this standard will be either more protective than what is required in 25 Pa. Code Chapter 102.8(g)(2) and (3). and will maintain and protect existing water quality and existing and designated uses as allowed in 102.8(g)(2)(iv) and 102.8(g)(3)(iii).

3. Summary Description of Post Construction Stormwater/Site Restoration BMPs (consistent with the design or applicable worksheets)
Key: RC = Rate Control VC = Volume Control WQ = Water Quality

In the lists below, check the BMPs identified in the PCSM Plan, and their function(s) using the above Key. More than one function may be checked for a BMP. A BMP may have more than one function (rate, volume, water quality), therefore, there may be more than one volume/acres listed. For example, a Rain garden/Bio-retention BMP may have a volume treated and acres treated for volume control and water quality, that differs from the volume treated and acres treated for rate control. If any BMP in the PCSM Plan is not listed below, it must be described in the space provided after "Other". Attach additional sheet(s) as needed.
For Rate Control provide the volume of stormwater treated and acres treated for the 100-year/24-hour storm event.
For Volume Control and Water Quality provide the volume of stormwater treated and acres treated for the 2-year/24-hour storm event.

BMP	Function(s)	Volume of stormwater treated	Acres treated
<input type="checkbox"/> Wet ponds	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Constructed wetlands	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Retention basins	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Detention basin	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Underground detention	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Dry Extended detention basin	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Sediment fore bay	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Infiltration trench	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Infiltration Berm/Retentive Grading	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Subsurface Infiltration bed	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Infiltration basin	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Pervious pavement	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Dry well/Seepage pit	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Bio-infiltration areas	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Rain gardens/Bio-retention	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Vegetated swales	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Constructed filters	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Protect Sensitive & Special Value Features	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Protect/Convert/Establish Riparian buffers	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Restoration: Buffers/ Landscape/Floodplain	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Disconnection from storm sewers	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Rooftop disconnection	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Vegetated roofs	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Runoff capture/Reuse	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Oil/grit separators	<input type="checkbox"/> WQ		
<input type="checkbox"/> Water quality inserts/inlets	<input type="checkbox"/> WQ		
<input type="checkbox"/> Street sweeping	<input type="checkbox"/> WQ		
<input type="checkbox"/> Other _____	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		
<input type="checkbox"/> Other _____	<input type="checkbox"/> VC <input type="checkbox"/> RC <input type="checkbox"/> WQ		

4. Off Site Discharge Analysis

Does the project propose any off-site discharges to areas other than surface waters? Yes No

If yes, the applicant must have appropriate easement that provides the legal authority for this off-site discharge. In addition, applicant must provide a demonstration in both the E&S and PCSM plans that the discharge will not cause erosion, damage, or nuisance to off-site properties.

5. Potential Pollution Causing Materials

Identify naturally occurring geologic formations or soil conditions that may have the potential to cause pollution during earth disturbance activities and include BMPs to avoid or minimize potential pollution and its impacts from the formation.

6. Riparian Buffers

A. Does the project discharge to a river, stream, creek, lake, pond or reservoir with a designated use of high quality or exceptional value? If so, is earth disturbance occurring within 150 feet of the river, stream, creek, lake, pond or reservoir?

Yes No

If Yes, go to B. If no, continue to Section 7.

B. Will you be protecting, converting, or establishing a 150 foot riparian buffer throughout the project area?

Protect Yes No Convert Yes No Establish Yes No

If No to all above, the application must contain a demonstration that any existing riparian buffer is undisturbed to the extent practicable to be an exception to 102.14.

7. Thermal Impacts Analysis

Explain how thermal impacts associated with this project were avoided, minimized, or mitigated.

8. Critical Stages

Identify the critical stages of implementation of the PCSM plan for which a licensed professional or designee shall be present on the project site.

SECTION E. ANTIDegradation Analysis Module
This Section is to be completed for Special Protection Waters Only
(Projects that drain to HQ/EV Waters and EV Wetlands).

PART 1 NONDISCHARGE ALTERNATIVES EVALUATION

E & S Plan	Official Use Only	PCSM Plan	Official Use Only
<p>Check off the environmentally sound nondischarge Best Management Practices (BMPs) listed below to be used prior to, during, and after earth disturbance activities that have been incorporated into the E & S Plan based on the site analysis. For BMPs not checked, provide an explanation of why they were not utilized, attach additional sheets if necessary.</p>		<p>Check off the environmentally sound nondischarge Best Management Practices (BMPs) listed below to be used after construction that have been incorporated into the PCSM Plan based on the site analysis. For BMPs not checked, provide an explanation of why they were not utilized, attach additional sheets if necessary.</p>	
<p>Nondischarge BMPs</p> <p><input type="checkbox"/> Alternative Siting</p> <p> <input type="checkbox"/> Alternative location</p> <p> <input type="checkbox"/> Alternative configuration</p> <p> <input type="checkbox"/> Alternative location of discharge</p> <p><input type="checkbox"/> Limited Disturbed Area</p> <p><input type="checkbox"/> Limiting Extent & Duration of Disturbance (Phasing, Sequencing)</p> <p><input type="checkbox"/> Riparian Buffers (150 ft min)</p> <p><input type="checkbox"/> Riparian Forest Buffer (150 ft min)</p> <p><input type="checkbox"/> Other _____</p>		<p>Nondischarge BMPs</p> <p><input type="checkbox"/> Alternative Siting</p> <p> <input type="checkbox"/> Alternative location</p> <p> <input type="checkbox"/> Alternative configuration</p> <p> <input type="checkbox"/> Alternative location of discharge</p> <p><input type="checkbox"/> Low Impact Development (LID / BSD)</p> <p><input type="checkbox"/> Riparian Buffers (150 ft min)</p> <p><input type="checkbox"/> Riparian Forest Buffer (150 ft min)</p> <p><input type="checkbox"/> Infiltration</p> <p><input type="checkbox"/> Water Reuse</p> <p><input type="checkbox"/> Other _____</p>	
<p>*<input type="checkbox"/> Identify any and all best management practices, design standards and alternatives that collectively are substantially equivalent to a riparian buffer or riparian forest buffer in effectiveness, to minimize the potential for accelerated erosion and sedimentation and to protect, maintain, reclaim and restore water quality and for existing and designated uses of a perennial or intermittent river, stream or creek or lake, pond or reservoir of this Commonwealth to ensure compliance with 25 Pa. Code Chapter 93 (relating to water quality standards).</p>			
<p>Will the nondischarge alternative BMPs eliminate the change in rate, volume, or quality during and after construction? If yes, antidegradation analysis complete.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If no, proceed to Part 2.</p>			

Part 2 Antidegradation Best Available Combination of Technologies (ABACT)

If the net change in stormwater discharge during or after construction is not fully eliminated by nondischarge BMPs, the applicant must utilize ABACT BMPs to manage the change. The applicant must specify whether the discharge will occur during construction, post-construction or both, and identify the technologies that will be used to ensure that the discharge will be a non-degrading discharge.

E & S Plan	Official Use Only	PCSM Plan	Official Use Only
<input type="checkbox"/> Treatment BMPs: <input type="checkbox"/> Sediment basin with skimmer <input type="checkbox"/> Sediment basin ratio of 4:1 or greater (flow length to basin width) <input type="checkbox"/> Sediment basin with 4-7 day detention <input type="checkbox"/> Flocculants <input type="checkbox"/> Land disposal: <input type="checkbox"/> Vegetated filters <input type="checkbox"/> Riparian buffers <150ft. <input type="checkbox"/> Riparian Forest Buffer <150ft. <input type="checkbox"/> Pollution prevention: <input type="checkbox"/> PPC Plans <input type="checkbox"/> Immediate stabilization <input type="checkbox"/> Street sweeping <input type="checkbox"/> Channels, collectors and diversions lined with permanent vegetation, rock, geotextile or other non-erosive materials <input type="checkbox"/> Stormwater reuse technologies: <input type="checkbox"/> Sediment basin water for dust control <input type="checkbox"/> Sediment basin water for irrigation <input type="checkbox"/> Other _____		<input type="checkbox"/> Treatment BMPs: <input type="checkbox"/> Infiltration Practices <input type="checkbox"/> Wet ponds <input type="checkbox"/> Created wetland treatment systems <input type="checkbox"/> Vegetated swales <input type="checkbox"/> Manufactured devices <input type="checkbox"/> Bio-retention/infiltration <input type="checkbox"/> Green Roofs <input type="checkbox"/> Land disposal: <input type="checkbox"/> Vegetated filters <input type="checkbox"/> Riparian Buffers <150ft. <input type="checkbox"/> Riparian Forest Buffer <150ft. <input type="checkbox"/> Pollution prevention: <input type="checkbox"/> Disconnection of roof drainage <input type="checkbox"/> Bio-retention/bio-infiltration <input type="checkbox"/> Street sweeping <input type="checkbox"/> Nutrient, pesticide, herbicide or other chemical application plan alternatives <input type="checkbox"/> PPC Plans <input type="checkbox"/> Non-structural Practices <input type="checkbox"/> Land Preservation <input type="checkbox"/> Restoration BMPs <input type="checkbox"/> Stormwater reuse technologies: <input type="checkbox"/> Cisterns <input type="checkbox"/> Rain barrels <input type="checkbox"/> Dry hydrant with underground storage <input type="checkbox"/> Spray/Drip Irrigation <input type="checkbox"/> Other _____	

* Identify any and all best management practices, design standards and alternatives that collectively are substantially equivalent to a riparian buffer or riparian forest buffer in effectiveness, to minimize the potential for accelerated erosion and sedimentation and to protect, maintain, reclaim and restore water quality and for existing and designated uses of a perennial or intermittent river, stream or creek or lake, pond or reservoir of this Commonwealth to ensure compliance with 25 Pa. Code Chapter 93 (relating to water quality standards).

Are the ABACT BMPs selected sufficient to minimize E & S discharges to the extent that existing or designated surface water uses are protected? <input type="checkbox"/> Yes If yes, antidegradation analysis is complete. <input type="checkbox"/> No. If no, and the project discharges to a HQ water, proceed to Part 3. If no and the project discharges to an EV Water, contact the local conservation district or Department regional office.		Are the ABACT BMPs selected sufficient to achieve no net change and assure that existing or designated surface water uses are protected? <input type="checkbox"/> Yes If yes, antidegradation analysis is complete. <input type="checkbox"/> No. If no, and the project is located in a HQ water, proceed to Part 3. If no and the project discharges to an EV Water, contact the local conservation district or Department regional office.	
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Part 3 Social or Economic Justification (SEJ) (for projects in high quality waters only)

If the project discharges to HQ waters only, is there an important economic or social justification for the project?

Yes No If yes, please contact the Department regional office for the county in which the project is located.

SECTION F. CONSULTANT FOR THIS PROJECT

Name		eFACTS Consultant ID	
Title	Consulting Firm	Seal (if applicable)	
Mailing Address			
City	State	ZIP+4	
Email	Phone	Ext	
	FAX		

SECTION G. COMPLIANCE HISTORY REVIEW

Is/was the applicant(s) in violation of any Department regulation, order, schedule of compliance or permit or in violation of any Department regulated activities within the past five years?

Yes No

If yes, list each permit order, schedule of compliance or project that is/was in violation and provide compliance status of the activity (use additional sheets to provide information on all permits).

Permit Program or Activity: _____ Permit Number (if applicable): _____

Brief description of non-compliance:

Steps taken to achieve compliance	Date(s) compliance achieved
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Current Compliance Status: In-Compliance In Non-Compliance

If in non-compliance, please attach schedule for achieving compliance.

SECTION I. CERTIFICATION

Applicant Certification

I certify under penalty of law that this application and all related attachments were prepared by me or under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my own knowledge and on inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. The responsible official's signature also verifies that the activity is eligible to participate in the NPDES permit, and that BMP's, E&S Plan, PPC Plan, PCSM Plan, and other controls are being or will be, implemented to ensure that water quality standards and effluent limits are attained. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment or both for knowing violations pursuant to Section 309(c)(4) of the Clean Water Act and, 18 Pa. C.S. §§4903-4904.

I grant permission to the agencies responsible for the permitting of this work, or their duly authorized representative to enter the project site for inspection purposes. I will abide by the conditions of the permit if issued and will not begin work prior to permit issuance.

(For individuals no indication of title is necessary, choose the box below. All others proceed to the next paragraph)

Individual; proceed to signature portion.

I hereby certify that I am the signatory pursuant to 25 Pa, Code § 92a.22 and 40 CFR §122.22 and that I am the person who is responsible for decision-making regarding environmental compliance functions for Enter Entity name the manager of one or more manufacturing, production, or operating facilities of the applicant and am authorized to make management decisions which govern the operation of regulated facility including having explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure the applicant's long term environmental compliance with environmental laws and regulations; and I am responsible for ensuring that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements.

(choose one of the following; not applicable for individuals):

- The responsible corporate officer president vice president secretary treasure of _____ corporation/Company
Entity name
- The member or manager of _____ LLC
Entity name
- The general partner of _____ partnership/LP/LLP
Entity name
- The principal executive officer or ranking elected official of _____ Municipality/State/Federal/other public agency
Entity name
- Power of Attorney/delegation of contractual authority (documentation supporting delegation of contracting authority must be provided) for _____
Entity name

SIGNATURES

Applicant

Co-Applicant (if applicable)

Print Name and Title of Person Signing

Print Name and Title of Person Signing

Signature of Applicant

Signature of Co-Applicant

Date Signed

Date Signed

Please note below the name, address and telephone number of the individual that should be contacted in the event additional information is required.

Name _____

Phone _____

FAX _____

Notarization:

Commonwealth of Pennsylvania

County of _____

Sworn to and Subscribed to Before Me This

NOTARY

_____ Day of _____,
20_____

SEAL

Notary Public

My Commission Expires: _____