



EROSION & SEDIMENTATION CONTROL PLAN REVIEW APPLICATION

PROJECT NAME: _____ MUNICIPALITY: _____

TYPE OF ACTIVITY: _____

PROJECT SITE LOCATION: _____

PARCEL ACRES: _____ ACRES TO BE DISTURBED: _____

RECEIVING STREAM OR BODY OF WATER: _____

APPLICANT: _____ PHONE # _____

ADDRESS: _____ ZIP: _____

PLAN PREPARERS NAME: _____ PHONE# _____

ADDRESS: _____ ZIP: _____

ESTIMATED PROJECT STARTING DATE: _____ ENDING DATE: _____

FEES ATTACHED: \$ _____ DATE: _____

SEE FEE SCHEDULE

MAKE CHECKS PAYABLE TO - *SUSQUEHANNA COUNTY CONSERVATION DISTRICT*

Check List

- ◇ 2 copies of narrative attached
- ◇ 2 copies of complete plans attached
- ◇ Review fee attached
- Digital Copy of the complete plan set

Fees and plans showing the required information are to be submitted with this application. Any additional plans or information required by the Susquehanna County Conservation District should be submitted promptly. The undersigned agrees to comply with the requirements of TITLE 25, Chapter 102, EROSION CONTROL RULES AND REGULATIONS set forth by the Pennsylvania Department of Environmental Protection, and further agrees to obtain all necessary permits and approvals connected with subject project. Applicant agrees to notify the District at least 3 days prior to the start of earthmoving, to maintain a copy of the approved Erosion & Sediment Pollution Control Plan on site, and to allow Conservation District Representatives to enter the project site at any time for inspection.

Applicant Signature/Title

Date