



STORMWATER & GRADING PERMIT APPLICATION
(Ordinance 160 of 2014)

1. MUNICIPAL USE ONLY		
Permit Received: / /	When ready: <input type="checkbox"/> Email <input type="checkbox"/> Call	Received as: <input type="checkbox"/> Walk-in <input type="checkbox"/> Mail
Application Received by:		<input type="checkbox"/> Email
Received:	<input type="checkbox"/> Three (3) physical copies of professionally designed plans <input type="checkbox"/> PDF of plans emailed through website	
	Date Received: / /	
Permit Fees (DUE AT SUBMISSION):		Date Received: / /
*See current Fee Schedule		

DO NOT ACTIVATE APPLICATION UNTIL FEES & PLANS HAVE BEEN RECEIVED

This application is processed by the Township Engineer. Cost of review and inspection are billed directly to the Applicant for Simplified plans. Non-Simplified plans are reimbursed using the escrow and based on West Vincent Township Fee Schedule (online).

Operations & Maintenance Agreement (provided by Township Engineer) must be executed for all Best Management Practices (BMPs) and Conveyances.

2. LOCATION	
Site Address:	
Tax Parcel ID: 25 - ____ - ____	Lot # (if applicable):

3. OWNER	Email:
Name:	Phone:
Address/City/State/Zip:	

4. APPLICANT	Email:	<input type="checkbox"/> Same as owner
Name:	Relationship to owner:	
Company (if applicable):	Phone:	
Address/City/State/Zip:		

I am the: Property Owner, or Officer/Official of the Property Owner, or Authority to make this application. I hereby state that the facts and statements including any attachments are to the best of my knowledge, accurate and complete. I further understand that any falsification of information or an incomplete application may be considered reason to reject the application and that the false statements herein are made subject to the penalties of PA Constitution Statute 4904 relating to unsworn falsification to authorities.

No permit shall be issued for the filling of materials other than clean fill.

Applicant's Signature: _____ Date: _____



WEST VINCENT GRADING PERMIT APPLICATION

(Ordinance 160 of 2014)

5. CONTRACTOR	Email:	<input type="checkbox"/> Same as applicant
Name:		
Company (if applicable):	Phone:	
Address/City/State/Zip:		

6. ENGINEER	Email:	<input type="checkbox"/> Same as applicant
Name:		
Company (if applicable):	Phone:	
Address/City/State/Zip:		

Simplified Stormwater Application pages must be printed out and filled out by hand.

FOR SIMPLIFIED STORMWATER PROJECT SMALL PROJECT ONLY (PG. 1)

File Number _____
Submitted Fees \$ _____

Date Received _____
Date of Approval of Application _____

Project Street Address: _____

Project Acct No (Tax Parcel #): _____

Project Name: _____

Owner's Name: _____

Owner's Mailing Address: _____

Phone# / Fax# / Email: _____

Please list the date(s) of any previous Small Project Applications for the subject property:

Proposed Activity:

Removal of ground cover, grading, filling or excavation of an area less than 5,000 square feet

Total area of land disturbance: _____ sq. ft.

Type of Regulated Activity (check all that apply):

- Removal of ground cover
- Grading
- Filling
- Excavation
- Other earth disturbance activity (please describe)

Addition of Impervious Surface (more than 1,000 SF or less than 5,000 SF)

Type of new impervious surface: driveway, shed, garage, walkway,

other (describe) _____

Total new impervious surface proposed for construction: _____ sq. ft.

Are you removing existing impervious as part of this project?

- No
- Yes – Total area of existing Impervious to be removed _____ sq. ft.

Check all items below that will be impacted by the project:

- _____ Creeks, streams, wetlands, or ponds
- _____ Existing stormwater management facility (basin, swale, etc.)
- _____ Easements (Specify location/type _____)

List separation distances between proposed infiltration facility and existing features:

- Water wells _____
- Septic drainfields / Alternate septic drainfields (min 25') _____
- Building w/ sub-grade elements (foundation/basement, etc.) (min 25') _____

FOR SIMPLIFIED STORMWATER PROJECT SMALL PROJECT ONLY (PG. 2)

Total runoff volume to be permanently removed/managed on site from attached calculation worksheet: _____ gallons or _____ cubic feet

Proposed Stormwater Management Controls (Best Management Practice):

- _____ Infiltration Trench
 - _____ Cistern / Rain Barrel (max 50% of volume)
 - _____ Other (describe) _____
- *Other BMPs require approval by Township Engineer of proposed design/construction details, etc.

Sketch

Provide a sketch of the proposed additional impervious area or land disturbance. Include the following on the sketch:

- Property boundary
- Location and approximate footprint (dimensions) of existing structures (buildings, patios, driveways, etc.)
- Approximate location of any of the following features which will be impacted by the project:
 - Mature trees, Sinkholes, Water wells, Septic drainfields, Alternate septic drainfields
 - Creeks, streams, wetlands, ponds
 - Existing stormwater management facilities (basins, swales, etc.)
- Location and approximate footprint of proposed impervious area or land disturbance.
- Approximate footprint and location of all structures on subject property and structures on adjacent properties if located within fifty feet (50') of the proposed impervious area or land disturbance
- Location and description of proposed stormwater management facilities (e.g. infiltration trench, swales, rain barrels, etc.)
- Direction of proposed stormwater discharge (e.g. with arrows pointing downslope)
- Direction of property grading (e.g. with arrows pointing downslope)
- Scale and north arrow

Person/Firm to be completing work: _____

Mailing Address: _____

Phone# / Fax# / Email: _____

Name of Person Submitting this Application: _____

Signature: _____

Date: _____

FOR SIMPLIFIED STORMWATER PROJECT SMALL PROJECT ONLY (PG. 3)

Small Project Application Calculation Worksheet

The applicant may use the following to calculate the amount of runoff which must be managed in accordance with Section 302-6.D / Appendix A of this Ordinance.

Project Name: _____

Owner Name: _____

Proposed Additional Impervious Area: _____ square feet

Impervious Area Calculations

Calculate the amount of runoff to be permanently removed (managed on site through reuse, evaporation, transpiration or infiltration). A maximum of 50% of the required Permanently Removed Runoff Volume can be addressed through reuse (cistern/rain barrel), the remainder shall be handled with an infiltration trench or other approved BMP:

Additional impervious area (in square feet) ÷ 12 = Permanently Removed Runoff Volume (PRV)

_____ square feet of additional impervious ÷ 12 = _____ cubic feet PRV

For Infiltration Trench (Complete attached detail with proposed size):

Excavated bed volume shall be equal to the Permanently Removed Runoff Volume, in cubic feet, calculated above, divided by 0.40 (stone void ratio). (i.e. PRV = 100 CF, Required Trench Volume → 100 CF / 0.4 = 250 CF → Utilize trench 25' long x 5' wide x 2' deep.

For Cistern/Rain Barrel (max 50% of volume):

_____ cubic feet x 7.48 gallons per cubic feet = _____ gallons PRV

*Provide construction detail/specification sheet for rain barrel/cistern; Detail must show

1. Overflow pipe at top of cistern discharging to a splash block/stone area
2. Overflow point must be minimum 50' from downslope property line and drain to grassed area that drains away from building.

Sketch (or attach additional sheet):

Person authorized to be completing work: _____

Mailing Address: _____

Phone# / Fax# / Email: _____

Name of Person Submitting this Application: _____

Signature: _____

Date: _____

FOR SIMPLIFIED STORMWATER PROJECT SMALL PROJECT ONLY (PG. 4)

EXAMPLE

Small Project Application Calculation Worksheet

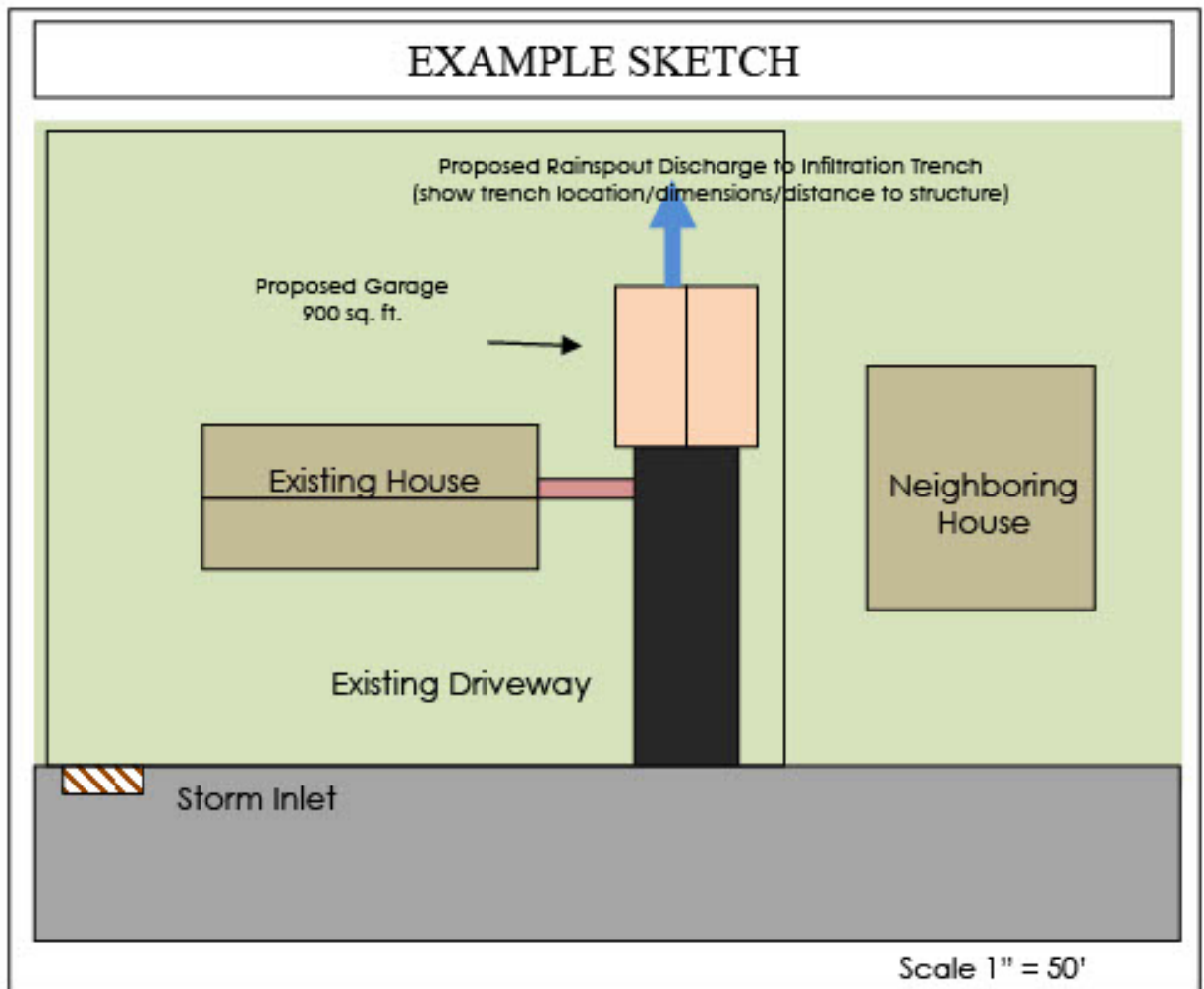
Landowner Name: Jane Doe (20 x 45' garage)
Owner Name: Jane Doe
Proposed Additional Impervious Area: 900 square feet

Impervious Area Calculations

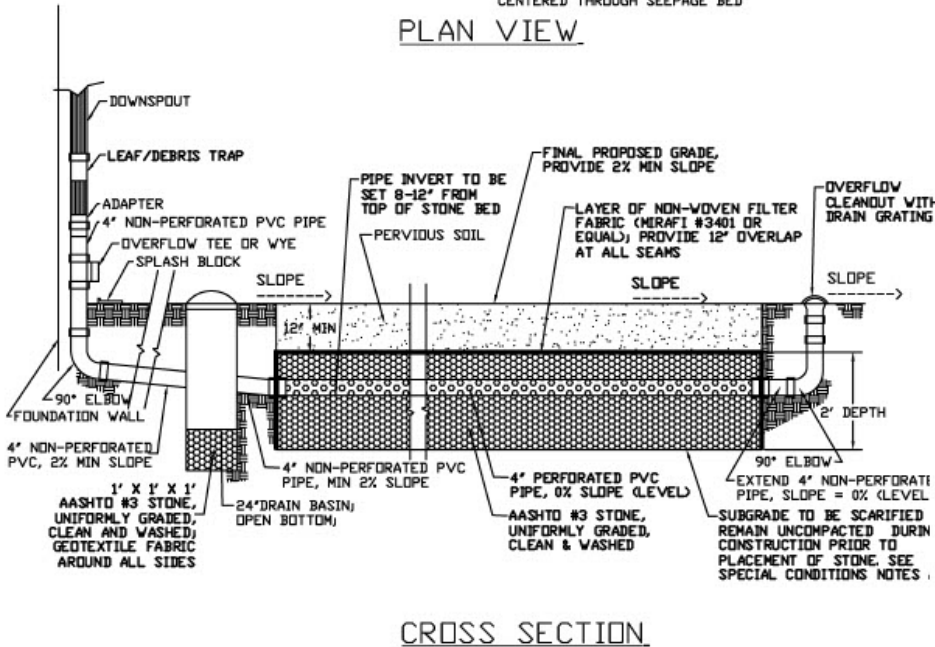
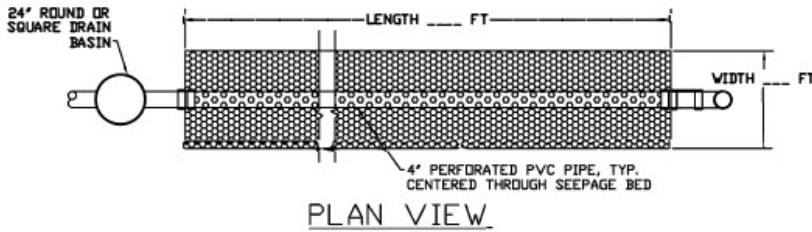
Calculate the amount of runoff to be permanently removed (managed on site through reuse, evaporation, transpiration or infiltration) using the following formula:

Additional impervious area ÷ 12 = Permanently Removed Runoff Volume (PRV)

900 square feet of additional impervious ÷ 12 = 75 cubic feet PRV
75 cubic feet x 7.48 gallons per cubic feet = 561 gallons PRV



SMALL PROJECTS
STONE INFILTRATION TRENCH
CONSTRUCTION DETAIL



GENERAL NOTES:

1. STONE INFILTRATION BED SHALL BE SIZED PER PROPOSED IMPERVIOUS SURFACE DRAINING TO IT.
2. STONE SHALL BE AASHTO #3, UNIFORMLY GRADED, CLEAN AND WASHED, WITH 40% VOID RATIO.
3. LEAF SCREENS SHALL BE INSTALLED OVER GUTTERS OR LEAF DEFLECTOR GUARDS INSTALLED IN THE DOWNSPOUT, OR OTHER APPROVED LEAF PROTECTION DEVICE.
4. PROPERTY OWNER SHALL BE RESPONSIBLE FOR THE MAINTENANCE OF STORMWATER FACILITIES IN ACCORDANCE WITH THE BRECKNOCK TOWNSHIP STORMWATER ORDINANCE, CHAPTER 93, AND THE RECORDED OPERATIONS & MAINTENANCE AGREEMENT.

CONSTRUCTION NOTES:

1. INSTALLATION OF STONE INFILTRATION TRENCH SHALL BE INSPECTED BY THE TOWNSHIP ENGINEER OR DESIGNATED REPRESENTATIVE, WITH A MINIMUM 24 HOURS NOTICE.
2. REQUIRED INSPECTIONS INCLUDE EXCAVATION - PRIOR TO PLACEMENT OF STONE; STONE/PIPING PRIOR TO TOP LAYER OF FABRIC; AND FINAL GRADING AND SEEDING. ADDITIONAL INSPECTIONS MAY BE NECESSARY AS DETERMINED BY TOWNSHIP ENGINEER.
3. PRIOR TO PLACEMENT OF STONE IN THE INFILTRATION TRENCH, THE CONTRACTOR OR PROPERTY OWNER SHALL MAKE A TEST PIT 2 FEET BELOW THE BOTTOM OF INFILTRATION TRENCH TO ENSURE THAT BEDROCK AND/OR GROUNDWATER ARE NOT PRESENT IN THIS ZONE; IF GROUNDWATER/BEDROCK IS ENCOUNTERED, IMMEDIATELY CONTACT THE TOWNSHIP ENGINEER TO DISCUSS REDESIGN AND RELOCATION OF THE INFILTRATION TRENCH.
4. EXCAVATION FOR THE INFILTRATION TRENCH SHALL BE PERFORMED WITH EQUIPMENT THAT WILL NOT COMPACT THE BOTTOM OF THE BED AREA.
5. INFILTRATION TRENCHES SHALL BE KEPT CLEAN OF SOIL/SEDIMENT DURING THE INSTALLATION PROCESS. IF INSPECTION INDICATES THAT SOIL HAS ENTERED THE INFILTRATION TRENCH, THEN APPROPRIATE MEASURES (IE CLEANING OF SOIL FROM FABRIC/STONE ETC. AND REPLACEMENT OF FABRIC/STONE) SHALL BE ADDRESSED.
6. AFTER INFILTRATION TRENCH IS INSTALLED, ALL HEAVY CONSTRUCTION EQUIPMENT SHALL BE RESTRICTED FROM THE TRENCH AREA TO ELIMINATE IMPACTS THAT MAY COMPROMISE IT. IN THE EVENT ANY IMPACTS COMPRISE THE FUNCTIONALITY OF THE INFILTRATION TRENCH, IT MUST BE IMMEDIATELY REPAIRED OR REPLACED TO DESIGN SPECIFICATIONS.

TRENCH DIMENSIONS:

FINAL TRENCH DIMENSIONS MAY VARY ACCORDING TO SITE CONDITIONS BUT FINAL DIMENSIONS MUST PROVIDE THE REQUIRED TRENCH VOLUME (LENGTH * WIDTH * DEPTH) AND BE APPROVED BY THE TOWNSHIP.

PROPERTY OWNERS SHALL BE RESPONSIBLE FOR STORMWATER FACILITIES IN ACCORDANCE WITH BRECKNOCK TOWNSHIP STORMWATER ORDINANCE, CHAPTER 93, AND THE RECORDED OPERATIONS & MAINTENANCE AGREEMENT.

TOWNSHIP USE ONLY BELOW THIS LINE



**STORMWATER & GRADING PERMIT APPLICATION
(Ordinance 160 of 2014)**

TOWNSHIP USE ONLY: Grading Permit No.

APPLICATION PROCESS CHECKLIST (to be completed by the Township)		Date	Reviewer
Stamp permit application and supporting documents with Received Date Stamp			
Assign Permit Number <i>(see top of page)</i>			
Verify property address and tax parcel number on application			
Permit Fee in accordance with current Township Fee Schedule	\$ _____		
Applicant submitted one (1) permit application, three (3) copies of plans and one (1) digital copy of the plans			
Place one (1) copy of permit application and (1) copy of supporting documents in the appropriate township property file			
Send one (1) copy of permit application and two (2) copies of supporting documents to Township Engineer for review			
Applicant submitted three (3) executed copies of the Operation & Maintenance (O&M) Agreement for Township review prior to approval of the Stormwater Site Plan			
O&M Agreement executed by Township			
Township received Approval Letter from Township Engineer			
Applicant picked up O&M Agreement and Plans to take for recording at the Chester County Recorder of Deeds			
Applicant submitted receipt to Township from the Chester County Recorder of Deeds for the recording of the O&M Agreement and Plans			
Applicant returned one (1) recorded O&M Agreement and one (1) recorded Plan to the Township			
Collected BMP fee (check # _____)	\$250.00		
Collected escrow (check # _____)	\$ _____		
<input type="checkbox"/> Plan Approved Approval Date:	<input type="checkbox"/> Revision Requested	<input type="checkbox"/> Revision Approved Revision Approval Date:	
<input type="checkbox"/> E&S Plan Approved Approval Date:	<input type="checkbox"/> Revision Requested	<input type="checkbox"/> Revision of E&S Plan Approved Revision Approval Date:	
_____		_____	
Township Official's Signature		Township Official's Title	

***Approved permit is valid for five (5) years from date of approval.**