



BOROUGH OF LEHIGHTON

****OFFICE USE ONLY****

Date Received: _____
Date Approved: _____
Date Inspected: _____
Date Connected: _____

APPLICATION FOR STORMWATER MANAGEMENT PLAN REVIEW

I. Applicant Information

Name: _____
Address: _____
Phone: _____ Cell Phone: _____ Fax: _____
Email: _____

II. Engineer Information

Name and Company: _____
Address: _____
Phone: _____ Cell Phone: _____ Fax: _____
Email: _____

III. Project Location:

IV. Project Description:

V. Applicant Signature

Sign: _____ Print: _____ Date: _____

****** Five (5) sets of SWM Site Plans are to be submitted with the application******

VI. Application Fee:

Applicant must submit \$200 fee with permit application

VII. Other Fees:

Applicant must submit a \$1,000 escrow payment for the Borough's Professional Consultant Review Fees.
Upon completion of the project, balance will be reimbursed to applicant

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Date of Acceptance as Completed Submittal: _____ Fee: _____ Check No. _____

Application Received by: _____ Date: _____

Application Forwarded to: _____ Date: _____

Borough Engineer signature: _____ Date: _____

Date Engineer returned to Borough: _____

Fee paid on: _____

Permit #: _____ Date: _____ By: _____