

East Marlborough Township
APPLICATION FOR DRIVEWAY PERMIT

Construct a new driveway _____

Alter an existing driveway _____

Location: _____

Between: _____ And _____
CROSS STREET CROSS STREET

Applicant Name: _____

Address: _____ State: _____ Zip Code: _____

Contact Person: _____ Title: _____

Phone Number: _____ Email: _____

Description of work including proposed gutter drainage at the road: (attach detailed sketch) _____

Proposed Start Date: _____ Proposed End Date: _____ PA One Call Serial No. _____

Road Width: _____ ft. Road Surface: (circle one) Pavement or Gravel Right of Way Width: _____ ft.

DRIVEWAY

Extent of Excavation: Length _____ Width _____ Depth _____ Total Square Feet _____

Driveway surface: (circle one) Blacktop Concrete Gravel Pavers Other _____

SIGHT DISTANCE

To the left of proposed driveway: _____ ft. To the right of proposed driveway: _____ ft.

STORMWATER MANAGEMENT

Is the driveway part of an approved Building Permit and Stormwater Mgmt. Plan, or approved Subdivision Plan?

If yes, check here ____ and answer the following:

Has the stormwater management system been installed per approved plan? Yes ____ No ____

If no, check here ____ and answer complete the following:

Since 12/03/2018, has the property previously received a SWM exemption or an approval for use of the Simplified Method?

If yes, check here ____, and contact the Township for a determination of the SWM requirements for this application.

If no, check here ____, and complete the following sections.

The total area of the proposed driveway = _____ sq. ft.

(Check below and provide appropriate calculations, plans, and details, if required.)

_____ If < 500 sf, project is exempt. (No further action required.)

_____ If > 500 sf and < 2,000 sf, provided SWM per Simplified Method for Small Projects, Appendix 1 of Ord. 2013-06

_____ If > 2,000 sf, provide full SWM design per Ord. 2013-06.

APPLICANT'S SIGNATURE

DATE

I hereby certify that the statements herein are true to the best of my knowledge and belief.
I understand that this permit will only be issued for the work listed and no other.
I understand that additional information and/or permits may be required prior to the issuance of this permit.
I understand that I shall give East Marlborough Township 24 hours notice prior to commencing work.

DO NOT WRITE BELOW THIS LINE

Date Received: _____ Permit No. _____ Permit Fee: \$ _____

Date Issued: _____ Issued By: _____ Paid By: [] check # _____

Date Complete: _____ Inspected By: _____ Date Rejected: _____

Comments: _____