



## BUILDING PERMIT APPLICATION

(PLEASE PRINT)

|   |  |  |  |   |  |   |  |
|---|--|--|--|---|--|---|--|
| Street Address  |  | Apt. or Tenant Address                     |  | City and State                                |  | Zip                                     |  |
| Subdivision   |  | Lot Number                                 |  | Parcel Number                                 |  | Zoning District                         |  |
| Public Water: Yes / No<br><b>*REQUIRED</b>  |  | Public Sewer: Yes / No<br><b>*REQUIRED</b> |  | Gas: Natural/Propane/None<br><b>*REQUIRED</b> |  | Sprinkler: Yes / No<br><b>*REQUIRED</b> |  |
| <b>Construction Est. Value</b><br>\$ _____<br><b>*REQUIRED- DO NOT INCLUDE PLUMBING, MECHANICAL, OR ELECTRICAL COST</b> |  |  |  |   |  |   |  |

**Property Owner:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Tenant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **State Contractor Lic. No:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Please note:**

1. All contractors are to supply a certificate of insurance providing evidence of statutory Workers Compensation Insurance and Commercial General Liability Insurance with a minimum limit of \$1,000,000 per occurrence. Doylestown Township, its elected and appointed officials, and employees shall be named additional insured under the contractor's General Liability Insurance policy.
2. Check the Township website to follow the permit application guidelines.

| TYPE OF RESIDENTIAL BUILDING PERMIT (Please check one:)    |  |   |                                  |
|--|--|---|----------------------------------|
| <input type="checkbox"/> Accessory Bldg (Over 1000 sq. ft) | <input type="checkbox"/> Demolition/Tank Removal             | <input type="checkbox"/> Swimming Pool                    | <input type="checkbox"/> Hot Tub |
| <input type="checkbox"/> New Residential Dwelling          | <input type="checkbox"/> Exterior Alterations/Additions      | <input type="checkbox"/> Interior Alterations             |                                  |
| <input type="checkbox"/> HUD Manufactured Home             | <input type="checkbox"/> Deck- Above grade 30 inches or more | <input type="checkbox"/> Construction within a Floodplain |                                  |

OR

| TYPE OF COMMERCIAL BUILDING PERMIT (Please check one:)   |   |   |                                     |
|--|---|---|-------------------------------------|
| <input type="checkbox"/> Additions   | <input type="checkbox"/> Exterior Alterations | <input type="checkbox"/> New Construction | <input type="checkbox"/> Re-Roofing |
| <input type="checkbox"/> Alarm/FM 200 System   | <input type="checkbox"/> Interior Alterations | <input type="checkbox"/> Tank Removal     |                                     |
| <input type="checkbox"/> Demolition: The Township requires a copy of the DEP Asbestos Abatement Permit |   |   |                                     |

| DESCRIPTION OF PROPOSED CONSTRUCTION |
|--------------------------------------|
|                                      |
|                                      |
|                                      |
|                                      |

**PLEASE NOTE: The property owner(s) must sign this application to verify the contractor or tenant has permission from the property owner(s) to do all construction work authorized by the issuance of this permit. Two copies of a site plan with two copies of the appropriate construction documents must accompany this application. In addition, an indexed digital copy must be included for all new subdivision or amended site plans.**

By signing this application, authorization is granted to any municipal representatives of Doylestown Township to access the above property as stated within this application and attached sub-trade permit application at any time, without an administrative warrant, to inspect and verify that any proposed use and/or structure contained within this application and/or that exists on the above property complies with all Doylestown Township zoning and building code ordinances.

The application together with the site plan and construction documents is made a part of this application by the undersigned. Furthermore, it is clearly understood and agreed to by the applicant and property owner that the Township office is not responsible for any property dimensions shown on the site plan and establishment of property lines is the sole responsibility of the property owner and applicant. The applicant and property owner also agree they are responsible for the replacement to Township standards of any Township road or infrastructure which is damaged during the building of the permitted structure and understands that the information provided on this application by the applicant(s) and property owner(s) is true and correct to the best of their knowledge or belief, and all information contained in their application becomes part of the public record. The applicant warrants the truthfulness of the information in the application, and that if any of the information provided is incorrect, the permit may be revoked. Furthermore, the application and permit can provide that if the permit is issued wrongfully, whether based on misinformation or an improper application of the code, the permit and certificate of occupancy may be revoked.

**Written approval of final inspections will be required from all other agencies issuing permits for this project before a Certificate of Occupancy can be issued. By signing this application, the applicant certifies that all the information is correct and that the property owner has authorized work and inspection of that work. All work to comply with the PA UCC as amended. Three to ten days before digging or excavating contact PA One Call (dial 811). RECCOMENDATION: Don't make final payment to contractor until final inspection is passed.**

Date: \_\_\_\_\_ Signature of Applicant(s) \_\_\_\_\_

Print Applicant(s) Name(s) \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Property Owner(s) \_\_\_\_\_ (Required)

Print Property Owner(s) Name(s) \_\_\_\_\_ (Required)

**FOR DETAILS OF THE GREEN POINTS INITIATIVE AND TO PRINT AN APPLICATION:**

<https://doylestownpa.org/departments/code-and-zoning/permit-applications-and-guidelines/>

**REQUIRED: Does the applicant intend to apply for a Green Points Initiative Rebate BEFORE final inspection of this project? (You must check one) ☒ YES ☐ NO**

**APPLICATION GUIDELINES:**

- At project completion, a digital copy of the site plan and of the as-built are required.
- Application forms are also available from the Township Website: [www.doylestownpa.org](http://www.doylestownpa.org)
- General Contractor on permit is required to submit sub-contractor contact information and insurance details.

**Residential:**

1. Construction drawings, if not signed by an architect or engineer, must have each page signed and dated by the property owner and state that the code followed is the PA UCC.
2. For new dwelling unit construction, follow the "New Home Construction Application Guidelines" found on the Township Website under Permit Applications & Guidelines.
3. New construction, including additions, requires an energy statement be enclosed with the application (e.g., REScheck) or a statement that the PA Alternative energy provisions will be used.
4. In addition to the building permit application, grading, plumbing, mechanical, electrical, zoning and highway occupancy permit applications may be required as appropriate and are to be submitted at the same time. PARTIAL OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.
5. For increases in impervious coverage between 1001 and 5000 sq. ft. follow Township Code Ch. 148 Appendix I and include the details of stormwater mitigation with your application.

**Commercial:**

1. All commercial construction documents are required to indicate that construction will comply with the requirements of the PA UCC and be signed and sealed by a PA architect or engineer.
2. Subcontractor applications, including plumbing, mechanical, electrical, sprinkler, alarm and road occupancy to be submitted at the same time as the building permit application. PARTIAL OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.
3. Include copies of other required applications/permits as appropriate (e.g. DEP asbestos abatement, COMcheck, PENNDOT highway occupancy permit, PA One Call, sewer, water, State licensing agency, etc.)
4. Follow "Accessibility Plan Review Requirements" found on the Township Website under Permit Applications & Guidelines.



## ACCESSIBILITY PLAN REVIEW REQUIREMENTS

### For Commercial/Non Residential Building Permit Applications

Universal Accessibility to all services, goods, events and functions offered within the Commonwealth of Pennsylvania is a guaranteed civil right. Please review your construction documents to ensure that right has not been violated. Basic compliance with all provisions of the standard ICC A117.1 can help to ensure that all of our citizens enjoy access to the goods and services offered within the state. Compliance with the applicable provision of the IEBC, IBC Chapter 11 and Appendix E, Pennsylvania Uniform Construction Code requirements and ICC A117.1 will be field verified and shall be mandatory for receipt of a Certificate of Occupancy. Full compliance with accessibility provisions of the codes is mandatory. Failure to include provisions for compliance on the plan, or in the execution of the work is not an excuse to deny basic accessibility to our citizens.

Accessibility Plan Reviews are based on the specified edition of the ICC A117.1 standard as referenced by the PA UCC International Building Code (IBC) or International Existing Building Code (IEBC). In order to perform a thorough Accessibility Plan Review, the following specifications, drawings, and details must be submitted:

1. Two complete sets of signed and sealed (as required by applicable laws) architectural plans and material specifications of all work. Details and plans drawn to scale with sufficient clarity, details and dimensions to show the nature and extent of the work proposed.
2. For alterations to an existing building, state which code is to be used, IBC or IEBC.
3. A site plan including the following information:
  - a. Size and location of all new construction and all existing structures on the site.
  - b. Location of any recreational facilities (i.e. pool, tennis, courts, playground, club house, gazebo, etc)
  - c. Established street grades and proposed finished grade.
  - d. Accessible parking, other locations of public access to the facility, accessible exterior routes between all required accessible features and locations of accessible entrances.
  - e. Indicate if each entrance/exit is accessible or not.
4. Architectural plans and specifications to include:
  - a. Description of uses and the proposed use group(s) for all portions of the building. The design approach for mixed-uses (as applicable).
  - b. Fully dimensioned drawings to determine areas and building height.
  - c. Adequate details and dimensions to evaluate accessible means of egress, including occupant loads for each floor, exit arrangement and sizes, corridors, doors, stairs, areas of refuge, assisted rescue etc.
  - d. Adequate details and dimensions to evaluate the accessible route to areas required to be accessible, including corridors, doors, protruding objects, maneuvering clearances, clear floor space at fixtures and controls, break rooms and bathrooms, assembly seating, etc.
  - e. Accessibility provisions including but not limited to access to services, seating, assistive listening systems, accessible fixtures, elevators, work surfaces and medical exam rooms (see L&I Directive).
  - f. Accessible plumbing facilities and details.
  - g. Indicate tactile and directional signage provided to comply with IBC Sec 1013.4, 1111, and Appendix E Sec E107, and their mounting height and location.
  - h. Details of required fire protection alarm systems and component mounting heights.
  - i. Millwork details of service desks and self-service counters showing the heights of operable controls mounted on those surfaces.

Note: The Accessibility Review will cover the scoping requirements of the PA UCC, IEBC, IBC Chapter 11, IBC Appendix E and other accessibility related requirements mainstreamed throughout the applicable building code. Technical requirements covered will be based on the applicable edition of ICC A117.1 Accessible and Usable Buildings and Facilities. Township review of accessibility is not a review for Federal ADA compliance. ADA compliance is the responsibility of the property owner.



Phone: 215-348-9915 • Fax: 215-348-8729

Website: www.doylestownpa.org

425 Wells Road • Doylestown, PA 18901

(Please check one)

☐ **PLUMBING**    or    ☐ **SPRINKLER**    **PERMIT APPLICATION**  
**(PLEASE PRINT)**

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Owner Phone No: \_\_\_\_\_

Owner Email: \_\_\_\_\_

Contractor State Registration No: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contractor Phone No: \_\_\_\_\_

Contractor Email: \_\_\_\_\_

Location of Work: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Type of Building (check one):    ☐ Residential    ☐ Non-Residential

Used as: \_\_\_\_\_ ENCLOSE 2 COPIES OF PLANS/SPECIFICATIONS

Type of Work: (check one)    ☐ New    ☐ Addition    ☐ Alteration    ☐ Repair    ☐ Other    ☐ ReplacementType of Fuel: (check one)    ☐ Oil    ☐ Gas    ☐ LPG    ☐ Electric    ☐ Wood/Pellet Stove

|   |                 |
|---|-----------------|
| <b>(Required)</b><br><b>Total Cost of Work:</b> | <b>\$</b> _____ |
|---|-----------------|

| Type:  | Quantity: | Fees: |
|--|-----------|-------|
| Baseboard / Radiant Floor                      |           |       |
| Bath   |           |       |
| Dishwashing Machine                            |           |       |
| Drinking Fountain                              |           |       |
| Fire Pump / Sprinkler System                   |           |       |
| Floor Drain                                    |           |       |
| Grease Trap                                    |           |       |
| Tank and Heater / Solar Heater                 |           |       |
| Toilet/Urinal                                  |           |       |
| Sewage Ejector/ Sump Pump                      |           |       |
| Shower   |           |       |
| Sink/ Lavatory                                 |           |       |
| Washing Machine                                |           |       |
| Water Supply Connection                        |           |       |
| Sewer Lateral Connection                       |           |       |
| Miscellaneous Fixture                          |           |       |
| <b>Total Fixtures and Fee:</b> (Twp. use only) |           |       |
| <b>PA UCC Surcharge Fee:</b> <b>\$4.50</b>     |           |       |
| <b>Total Fees:</b> (Twp. use only)             |           |       |

By signing this application, the applicant certifies that all the information is correct and that the property owner has authorized work and Township inspection of that work. All work to comply with the PA UCC as amended. Please call Doylestown Township at 215-348-9915 to schedule inspections at least 24 hours in advance.



## MECHANICAL PERMIT APPLICATION (PLEASE PRINT)

Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Owner Phone No: \_\_\_\_\_  
 Owner Email: \_\_\_\_\_

Contractor State Registration No: \_\_\_\_\_  
 Contractor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contractor Phone No: \_\_\_\_\_  
 Contractor Email: \_\_\_\_\_

Location of Work: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Type of Building: (check one) ☐ Residential ☐ Non-Residential

Used as: \_\_\_\_\_ ENCLOSE 2 COPIES OF PLANS/SPECIFICATIONS

Type of Work: (check one) ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Other ☐ Replacement

Type of Fuel: (check one) ☐ Oil ☐ Gas ☐ LPG ☐ Electric ☐ Wood/Pellet Stove

**(Required)**  
**Total Cost of Work:**

\$ \_\_\_\_\_

| Type of Equipment          | Quantity | Type of Equipment   | Quantity |
|----------------------------|----------|---|----------|
| Air Cleaner                |          | HVAC Return   |          |
| Air Conditioner            |          | HVAC Vent   |          |
| Air Handler                |          | Incinerator   |          |
| Boilers                    |          | Mini Split  |          |
| Floor Furnace              |          | Radiant Heater  |          |
| Forced Air System          |          | Range <input type="checkbox"/> Com. <input type="checkbox"/> Dom. |          |
| Fuel Storage Tank          |          | Range Hood  |          |
| Gas Fireplace              |          | Refrigeration Unit  |          |
| Gas Piping                 |          | Solar System  |          |
| Generator                  |          | Solid Fuel Appliance  |          |
| Geothermal System          |          | Wall Heater   |          |
| Hazardous Exhaust          |          | Wood Stove/Pellet Stove   |          |
| Heat Pump                  |          | Ventilation Fan   |          |
| Hood Vent Fire Suppression |          | Other:  |          |

**Mechanical Permit Fees:** (Twp Use Only)

**PA UCC Surcharge Fee:** \$4.50

**Total Fees Due:** (Twp. use only)

By signing this application the applicant certifies that all the information is correct and that the property owner has authorized work and Township inspection of the work. All work to comply with the PA UCC as amended. Please call Doylestown Township a 215-348-9915 to schedule inspections at least 24 hours in advance.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_ (Required)  
 Print Applicant's Name \_\_\_\_\_ (Required)



## ELECTRICAL PERMIT APPLICATION (PLEASE PRINT)

Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Owner Phone No: \_\_\_\_\_  
 Owner Email: \_\_\_\_\_

Contractor State Registration No: \_\_\_\_\_  
 Contractor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contractor Phone No: \_\_\_\_\_  
 Contractor Email: \_\_\_\_\_

Location of Work: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Type of Building: (check one) ☐ Residential ☐ Non-Residential

Type of Work: (check one) ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Replacement

If this application is for **BACKUP / STANDBY GENERATOR**, is the fuel source: ☐ PROPANE ☐ NATURAL GAS ☐ DIESEL

**If fueled by Natural Gas or Diesel, a Mechanical Permit application is also required. (No Mechanical Permit required for Propane fueled generators)**

MECHANICAL PERMIT APPLICATION ATTACHED ☐

Brief Description of work: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Total Cost of Electrical Work: \$ \_\_\_\_\_

All electrical permit applications, residential and non-residential, are to have attached TWO COPIES of an electrical plan, stamped and signed as reviewed and approved for PA UCC compliance by a Certified Third Party Agency.

All rough and final inspections are required to be undertaken by a PA Labor and Industry certified Third Party Inspector. Copies of all inspection reports to be sent to the Township quoting this permit number. A full list of third party agencies is found on the Pennsylvania Labor and Industry website.

Go to: Pennsylvania Labor & Industry Website  
 Select: Uniform Construction Code  
 Select: Certified Third Party Agencies (Buildings)

**TWO (2) COPIES of 3<sup>rd</sup> PARTY APPROVED PLANS ATTACHED** ☐

|                               |                 |
|-------------------------------|-----------------|
| <b>Electrical Permit Fee:</b> | <b>\$ 55.00</b> |
| <b>PA UCC Surcharge Fee:</b>  | <b>\$ 4.50</b>  |
| <b>Total Fees:</b>            | <b>\$ 59.50</b> |

By signing this application, the applicant certifies that all the information is correct and that the property owner has authorized work and inspection of that work. All work to comply with the PA UCC as amended.

Date: \_\_\_\_\_ Signature of Applicant(s) \_\_\_\_\_

Print Applicant(s) Name(s) \_\_\_\_\_

Provide 2 copies of all plans submitted

Water Service: ☐ Public ☐ Private      Sewer Service: ☐ Public ☐ Private

## SITE PLAN

7

## **IMPERVIOUS COVERAGE**

THIS CALCULATION IS REQUIRED FOR ALL PERMITS THAT WILL RESULT IN ADDITIONAL GROUND BEING COVERED: SHEDS, ADDITIONS & PATIOS, ETC.

|                |            |                        |                 |                |                        |     |  |
|----------------|------------|------------------------|-----------------|----------------|------------------------|-----|--|
| Street Address |            | Apt. or Tenant Address |                 | City and State |                        | Zip |  |
| Subdivision    | Lot Number | Parcel Number          | Zoning District |                | Permitted Impervious % |     |  |

### **DEFINITIONS**

**IMPERVIOUS SURFACE** – Any surface which does not absorb rain; all buildings, parking areas, driveways, roads, sidewalks and any areas in concrete, asphalt, packed stone, pavers on sand or other equivalent surfaces. In addition, other areas determined by the Township Engineer to be impervious within the meaning of this definition shall also be classified as impervious. For purposes of this definition the areas of a swimming pool or pond located inside the coping shall be classified as impervious.

**NET BUILDABLE SITE AREA** – Net buildable site area is calculated for the purpose of determining allowable impervious surface and land permitted to be developed. Net buildable site area equals total lot area contained in the subdivision or land development application:

- (a) Minus ultimate rights-of-way of existing streets;
- (b) Minus land which is not contiguous or which is separated from the site by a road or railroad;
- (c) Minus land shown on previous subdivision or land development plans as reserved for open space or other uses which restrict it from development;
- (d) Minus all land restricted by easements or covenants; and
- (e) Minus land required to be left open for resource protection or to meet minimum open space requirements of this chapter.

**IMPERVIOUS SURFACE RATIO** – The total area of all impervious surfaces divided by the net buildable site area.

### **IMPERVIOUS SURFACE PERMITTED TO BE DEVELOPED**

| <b><u>This table for properties regulated by percentage impervious</u></b> |                  | <b><u>This table for properties regulated by square footage impervious</u></b> |                  |
|--|------------------|--|------------------|
| Lot Size (Note: 1 Acre = 43560 sq. ft.)                                    | (sq. ft.)        | Maximum permitted impervious sq. ft.   | (sq. ft.)        |
| Driveway   | (sq. ft.)        | Driveway   | (sq. ft.)        |
| Walkway  | (sq. ft.)        | Walkway  | (sq. ft.)        |
| Buildings  | (sq. ft.)        | Buildings  | (sq. ft.)        |
| Patio/Pool   | (sq. ft.)        | Patio/Pool   | (sq. ft.)        |
| Easements/Other  | (sq. ft.)        | Easements/Other  | (sq. ft.)        |
| Total Existing Impervious  | (sq. ft.)        | Total Existing Impervious  | (sq. ft.)        |
| Proposed Construction  | (sq. ft.)        | Proposed Additional sq. ft impervious  | (sq. ft.)        |
| <b>Total:</b>  | <b>(sq. ft.)</b> | <b>New Total Sq. Ft. Impervious:</b>   | <b>(sq. ft.)</b> |

(FOR USE BY DOYLESTOWN TOWNSHIP)

| <b>IMPERVIOUS COVERAGE</b> |            |                  |
|----------------------------|------------|------------------|
| Total Impervious Surface   | Proposed % | Proposed Sq. Ft. |
|                            | Allowed %  | Allowed Sq. Ft.  |

**\*\* For increases in impervious coverage between 1001 and 5000 sq. ft. follow Township Code Ch. 148 Appendix I and include the details of stormwater mitigation with your application.**





Phone: 215-348-9915 • Fax: 215-348-8729

Website: www.doylestownpa.org



doylestown

425 Wells Road • Doylestown, PA 18901

### CHANGE OF CONTRACTOR / SUBCONTRACTOR (PLEASE PRINT)

As per the Pennsylvania Workers Compensation Insurance regulation, all contractors/subcontractors are required to provide proof of Workers Compensation and Liability Insurance. For any changes in contractor/subcontractor, please provide a liability insurance certificate naming Doylestown Township as additional insured in addition to the Worker's Compensation insurance certificate.

|                      |                   |
|----------------------|-------------------|
| <b>Job Location:</b> | <b>Permit No:</b> |
|----------------------|-------------------|

#### Contractor leaving the job:

|  |  |                                     |  |
|--|--|-------------------------------------|--|
| <b>Contractor:</b>                               |  |                                     |  |
| <b>Contractor Address:</b>                       |  |                                     |  |
| <b>City, State, Zip:</b>                         |  |                                     |  |
| <b>Phone:</b>                                    |  | <b>Fax:</b>                         |  |
| <b>E-Mail:</b>                                   |  | <b>State Contractor License No.</b> |  |
| <b>Trade (If other than general contractor):</b> |  |                                     |  |

#### New contractor taking their place:

|  |  |                                     |  |
|--|--|-------------------------------------|--|
| <b>Contractor:</b>                               |  |                                     |  |
| <b>Contractor Address:</b>                       |  |                                     |  |
| <b>City, State, Zip:</b>                         |  |                                     |  |
| <b>Phone:</b>                                    |  | <b>Fax:</b>                         |  |
| <b>E-Mail:</b>                                   |  | <b>State Contractor License No.</b> |  |
| <b>Trade (If other than general contractor):</b> |  |                                     |  |

#### Signatures Required

|  |                    |              |
|--|--------------------|--------------|
| <b>Property Owner or Individual Responsible for Property</b> | <b>Print Name:</b> | <b>Date:</b> |
|  | <b>Sign:</b>       |              |
| <b>General Contractor:</b>                                   | <b>Print Name:</b> | <b>Date:</b> |
|  | <b>Sign:</b>       |              |

# Don't Let Storm Water Run Off With Your Time and Money!

## *What the Construction Industry Should Know About Storm Water In Our Community*

The construction industry plays an important role in improving our community's quality of life by not only providing new development, but also protecting our streams and rivers through smart business practices that prevent pollution from leaving construction sites.

Storm water runoff leaving construction sites can carry pollutants such as dirt, construction debris, oil, and paint off-site and into storm drains. In our community, storm drains carry storm water runoff directly to local creeks, streams, and rivers with no treatment. Developers, contractors, and homebuilders can help to prevent storm water pollution by taking the following steps:

1. Comply with storm water permit requirements.
2. Practice erosion control and pollution prevention practices to keep construction sites "clean."
3. Conduct advanced planning and training to ensure proper implementation on-site.

The remainder of this fact sheet addresses these three steps.

### Storm Water Permit Requirements for Construction Activity

Planning and permitting requirements exist for construction activities. These requirements are intended to minimize storm water pollutants leaving construction sites.

- Pennsylvania's Erosion and Sediment Pollution Control Program (25 Pa. Code, Chapter 102) requires Erosion and Sediment Control Plans for all earth disturbing activities.
- The National Pollutant Discharge Elimination System (NPDES) Permit Program (25 Pa. Code, Chapter 92) requires that construction activities disturbing greater than one acre submit a Notice of Intent for coverage under a general NPDES permit.



Knowing your requirements before starting a project and following them during construction can save you time and money, and demonstrate that you are a partner in improving our community's quality of life. For more information about these programs, contact your local county conservation district office or the Department of Environmental Protection.

#### Erosion Control Practices:

- Perimeter controls (e.g. silt fence)
- Sediment traps
- Immediate revegetation
- Phased, minimized grading
- Construction entrance
- Protection of streams and drainage ways
- Inlet protection



**An Ounce of Prevention** Rain that falls onto construction sites is likely to carry away soil particles and other toxic chemicals present on construction sites (oil, grease, hazardous wastes, fuel). Storm water, if not properly managed, carries these pollutants to streams, rivers, and lakes. Erosion and sediment control practices can serve as a first line of defense,

## Pollution Prevention Practices:

- Designated fueling and vehicle maintenance area away from streams.
- Remove trash and litter.
- Clean up leaks immediately.
- Never wash down dirty pavement.
- Place dumpsters under cover.
- Dispose of all wastes properly.

minimizing clean up and maintenance costs, and the impacts to water resources caused by soil erosion during active construction. Erosion controls can reduce the volume of soil going into a sediment control device, such as a sediment trap, therefore, "clean out" frequencies are lower and maintenance costs are less. When possible, divert water around the construction site using berms or drainage ditches.

In addition, use pollution prevention and "good housekeeping measures" to reduce the pollution leaving construction sites as well. This can be as simple as minimizing the pollution source's contact with rainwater by covering it, maintaining a "clean site" by reducing trash and waste, and keeping vehicles well maintained.

## The Best Laid Plans

Plans such as erosion and sediment control plans and storm water pollution prevention plans are important tools for outlining the erosion control and pollution prevention practices that you will use to manage storm water runoff prior to breaking ground. Developing good plans allows for proper budgeting and planning for the life of the project. Proper installation and maintenance of erosion and storm water controls is essential to a plan that works. Training for on-site staff helps to ensure the proper installation and maintenance of erosion controls and pollution prevention practices. Inspect controls and management techniques regularly to ensure they are working, especially after storm events. If polluted storm water is leaving the site, you may need to repair or add additional storm water controls.



## The Bigger Storm Water Picture

Your community is preventing storm water pollution through a comprehensive storm water management program. This program addresses storm water pollution from construction, but it also deals with new development, illegal dumping to the storm sewer system, and municipal operations. It will also continue to educate the community and get everyone involved in making sure the only thing that storm water contributes to our streams is . . . water! Contact your community or the Pennsylvania Department of Environmental Protection for more information about storm water management.

### For more information:

Pennsylvania Association of Conservation District's:  
<http://www.pacd.org/default.html>

Pennsylvania Handbook of Best Management Practices for Developing Areas:  
[http://www.pacd.org/products/bmp/bmp\\_handbook.html](http://www.pacd.org/products/bmp/bmp_handbook.html)

Storm Water Manager's Resource Center:  
<http://www.stormwatercenter.net>

Pennsylvania Department of Environmental  
Protection: <http://www.dep.state.pa.us>

