

REGULAR MEETINGS:
SECOND TUESDAY OF EACH MONTH

PLEASE ADDRESS ALL CORRESPONDENCE
TO: P.O. BOX 414
MC KEES ROCKS, PA 15136

STOWE TOWNSHIP

BOARD OF COMMISSIONERS
ALLEGHENY COUNTY, PENNSYLVANIA
PHONE: 412-331-4050

APPLICATION FOR SITE PLAN APPROVAL / LAND DISTURBANCE PERMIT

THIS APPLICATION MUST BE COMPLETED IN FULL AND ACCOMPANIED BY THE REQUIRED FEE, PLANS AND NARRATIVE BEFORE IT WILL BE ACCEPTED FOR REVIEW.

Type of Application _____

Name of Project _____ Tax Parcel # / Lot & Block _____

Site Street Address _____

Total Project Acres _____ Total # of Lots _____ Total Disturbed Acres _____

Current Zoning _____ Existing Land Use _____

Proposed Land Use _____

Applicant's Name _____ Telephone # _____

Applicant's Address _____

Applicant's E-mail Address _____

Property Owner of Record _____ Telephone # _____

Property Owner's Address _____

Engineer _____ Telephone # _____

Engineer's Address _____

Engineer's E-mail Address _____

Make check payable to Stowe Township

Application Fee: \$ _____ Check # _____ Receipt # _____

Legal Escrow: \$ _____ Check # _____ Receipt # _____

Engineering Escrow: \$ _____ Check # _____ Receipt # _____

The undersigned agree to comply with all requirements of Pennsylvania Department of Environmental Resources Title 25, Chapter 102, Erosion & Sedimentation Control Rules and Regulations and the Stowe Township Storm Water Management Ordinance, and further agree to obtain all necessary permits associated with the subject project.

Signature of Applicant _____ Date _____

Signature of Planning Director _____ Date _____