

**Application for a Stormwater Management Plan Approval and Stormwater Management Permit**

**STRASBURG TOWNSHIP  
Lancaster County, Pennsylvania**

**Check box if this is for Minor Land Disturbance Activity**

Application is hereby made to Strasburg Township for the issuance of a Stormwater Management Permit pursuant to the specifications herewith submitted.	
1. Name of Property Owner(s):	
Address:	
	Telephone No.:
2. Name of Applicant (if other than owner):	
Address:	
	Telephone No.:
3. Project Location:	
4. Type of Earth Disturbance Activity:	
A. New impervious or semi-impervious surface _____ (sq. ft./ac.)	
B. Removal of ground cover, grading, filling, or excavation _____ (sq. ft./ac.)	
5. If the property is the subject of a subdivision or land development, provide plan book record number or Lancaster County Tax Identification Number. _____	
6. Stormwater Management Site Plan Prepared By:	
Address:	
	Telephone No.:
The undersigned hereby represents that, to the best of their knowledge and belief, all information listed above and on the reverse side of this page is true, correct, and complete.	
Date:	Applicant Signature:

<b>For Township Use Only</b>	
<b>File No.:</b> _____	<b>Date of Receipt:</b> _____

**For assistance in completing the Minor Project Application, please reference the  
"Stormwater Management Design Assistance Manual for Minor Projects"**