BOROUGH OF CONSHOHOCKEN
Borough of Conshohocken 400 Fayette Street, Suite 200
Conshohocken, PA. 19428
Phone (610) 828-1092    Fax (610) 828-0920

GRADING, DRAINAGE & EROSION CONTROL APPLICATION

For Office Use Only

Date Application Received:

Permit Fee $ ___________  ❑ Cash ❑ Check # __________ Receipt # __________

PERMIT FEE: $500 FOR COMMERCIAL AND RENTAL PROPERTIES OR $300 FOR OWNER OCCUPIED. INCLUDES THE ADMINISTRATIVE, PLAN REVIEW AND INSPECTION FEES INCURRED BY THE BOROUGH IN ORDER TO PROCESS THIS APPLICATION.

Date Permit Issued: ___________ Issued By ___________

Name ___________________________ Address __________________________________________
Location and/or Description of Property ________________________________________________________
__________________________________________________________________________________________

OTHER PROPERTIES:
Does work back up or discharge water on, or affect any other property in any way?  ____ Yes  ____ No
If so, set forth other properties affected and to what extent: __________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Erosion Control Devices to be utilized during construction:_________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Plans Submitted: Title: ________________________ Date: _______ Registered Engineer: _______________

Description of work to be performed and method of operation: ______________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Method of maintaining and protecting existing drainage facilities: ________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Anticipated date to begin work: ________________ Anticipated date to complete work: ______________

SIGNATURE OF APPLICANT: _____________________________________ DATE: __________________

REVISED 11/2017