

Application for Erosion and Sedimentation Pollution Control Plan Adequacy Review COLUMBIA COUNTY CONSERVATION DISTRICT

702 Sawmill Road, Suite 204, Bloomsburg, PA 17815
Phone 570-784-1310 ext. 102 Fax 570-784-3247

This application must be completed by the applicant or his/her agent and submitted along with the other listed requirements before an Erosion and Sedimentation Pollution Control Plan adequacy review can begin.

Project Name _____ Date _____
Receiving Stream _____ Municipality _____
Chapter 93 Classification _____ Total Project Acres _____
Number of Residential Lots _____ Disturbed Acres _____
Proposed Impervious Area _____ Proposed Land Use _____

NPDES APPLICATION REQUIREMENTS _____ NPDES or Earth Disturbance Permit
(Check the appropriate space) _____ No NPDES or Earth Disturbance Permit

APPLICANT INFORMATION

Name _____
Address _____
City _____
State _____ Zip _____
Phone _____
Email _____

PLAN PREPARER INFORMATION

Company name _____
Preparer's name _____
Address _____
City _____ State _____
Zip _____ Phone _____
Email _____

APPLICATION CHECKLIST FOR NON-PERMITTED SITES

- _____ One (1) copy of E&S plan drawings _____ One (1) copy of location map
 - _____ One (1) copy of E&S plan narrative _____ One (1) copy of application form
 - _____ Check made payable to the Columbia County Conservation District for review fee
- * Permitted sites must follow NPDES Permit requirements ***

The undersigned agrees to comply with all requirements of 25 PA § code 102.1 et seq., the erosion and sedimentation control regulations of the Department of Environmental Protection and further agrees to obtain all necessary Federal, State, County and local permits associated with this project.

I affirm that a person trained and experienced in erosion and sedimentation pollution control methods and techniques has prepared the above referenced plan. The applicant also authorizes the Columbia County Conservation District to make site inspections as necessary.

Signature of applicant (Date)



For Official Use Only

Application # _____
Fees Collected _____

Date Received _____
Check # _____