



TOWN OF EAST BRIDGEWATER

Department of Public Works

49 Dean Place
East Bridgewater, MA 02333
Phone: 508-378-1620

The undersigned hereby submits this Application and supporting documents in accordance with the Town Stormwater Management Bylaw and Regulations.

Stormwater Management Permit Application						
Property Owner Information:						
Name				Signature		
Address				City, State, Zip		
Email				Phone		
Applicant Information:						
Name				Signature		
Address				City, State, Zip		
Email				Phone		
Agent Responsible:						
Name				Signature		
Address				City, State, Zip		
Email				Phone		
Project Information:						
Address						
City				State		Zip
Property Information	Map	Parcel ID		Unit	Lot Area	
Description of Project						
List Zoning Districts <i>Include all Districts including Overlay Districts</i>						
Surface Waters to which the Project Discharges						
Other Permits Requested/Received <i>Attach additional sheets if needed</i>						
				How much New Impervious Area will result from the Project?	How much Disturbed Area will result from the Project?	
				_____ ft ²	_____ ft ²	



Stormwater Management Permit Application (Continued)

Type of Permit (check applicable box)	Administrative – Land Clearing <input type="checkbox"/>	Administrative – Subdivision Lot <input type="checkbox"/>	General <input type="checkbox"/>	
Application Fee	\$ _____			
Stormwater System Construction Cost:	\$ _____			
Project Specifics	Yes	No	N/A	Description <i>(Attach additional sheets as needed)</i>
Will the project result in the disturbance of one or more acres of land?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Will the project result in land disturbance of more than 10,000 square feet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is the project part of a larger previously approved Definitive Subdivision that has already been accepted by the Town?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Will the project result in the discharge of stormwater to Critical Areas with Sensitive Resources as described by Massachusetts Stormwater Management Standard No. 6?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Will the project discharge stormwater to an impaired water body?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Will the project include the construction of Stormwater Management Facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Will the construction activity be located within the Town's MS4 area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	