pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

NOTIFICATION OF PROPOSED STORMWATER DISCHARGES TO MS4s AND CSSs FOR CHAPTER 102 PERMITS

GENERAL INFORMATION (COMPLETED BY APPLICANT)

Applicant Name: _____ Contact Name: _____

Applicant Address: _____ Contact Phone: _____

Applicant City, State, ZIP: _____ County: _____

Project Site Name: Municipality:

SEWER SYSTEM AND DISCHARGE INFORMATION (COMPLETED BY APPLICANT)

Stormwater will be discharged to a(n): ☐ MS4 ☐ CSS ☐ During Construction ☐ After Construction

Name of MS4 or CSS Owner: _____ Discharge Point ID: _____

Proposed Change(s) in Stormwater Runoff ***Peak Discharge Rate*** (cfs): ☐ No Change

☐ Increase @ ☐ 2-yr _____ ☐ 10-yr _____ ☐ 50-yr _____ ☐ 100-yr _____

☐ Decrease @ ☐ 2-yr _____ ☐ 10-yr _____ ☐ 50-yr _____ ☐ 100-yr _____

Proposed Change in Stormwater Runoff ***Volume*** up to the 2-year/24-hour storm (CF): ☐ No Change

☐ Increase _____ ☐ Decrease _____

Proposed Change in Stormwater ***Quality (Pollutant Loads)*** up to the 2-year/24-hour storm (lbs): ☐ No Change

APPLICANT CERTIFICATION

I certify under penalty of law (see 18 Pa.C.S. § 4904 (relating to unsworn falsification)) that the information reported herein was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the information, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Applicant Name **Official Title**

Applicant Signature **Date Signed**

ACCEPTANCE OF DISCHARGE (COMPLETED BY MS4/CSS OWNER, IF REQUIRED)

☐ I agree to accept the increase in stormwater runoff rate, volume or quality (pollutant loads) if identified above.

Name of Person Signing for MS4 or CSS Permittee **Official Title**

MS4 or CSS Permittee Signature **Date Signed**