

DRAINAGE PERMIT

Date: _____

Permit No. _____

Expiration Date: _____

TOWNSHIP OF PYMATUNING
Mercer County, Pennsylvania

INSPECTION REQUIRED BEFORE WORK IS BEGUN AND AT COMPLETION OF PROPOSED WORK

Arrange for inspection by contacting the Pymatuning Township Roadmaster at 646-1134 at least 24 hours in advance to permit scheduling.

TO BE COMPLETED BY APPLICANT

TO BE COMPLETED BY THE TOWNSHIP

Name _____

Address _____

Phone _____

I hereby request permission to install

() Driveway Culvert

() Other (Describe) _____

Site sketch of proposed work is attached hereto.

The location of the proposed work is as follows:

Address _____

Subdivision Plan _____

Lot No. _____

I acknowledge that I have read this application and agree that it is correct and that I agree to comply with all Pymatuning Township and Commonwealth of Pennsylvania laws regulating drainage. Further, I agree to save Pymatuning Township, its officers, employees, and agents harmless from any and all costs, damages and liabilities which may accrue or be claimed to accrue by reason of any work performed under this Permit.

Tributary Area (Acres) _____

Anticipated Flow (CFS) _____

Required Pipe Size _____

Required Pipe Length _____

Required Ditch Size _____

Required Pipe (Ditch) Slope _____

Flowline (Invert) Elevation _____

End Walls Required _____

Type of Pipe Installed _____

Other _____

APPROVALS AND INSPECTIONS

Application

() Approved () Rejected

By _____ Date _____

Inspection

By _____ Date _____

Result _____

Remarks _____

*** \$ 75.00 Fee Must Accompany Application

Pymatuning Township Municipal Building 724-646-1134