



COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 BUREAU OF WATERSHED MANAGEMENT

**EROSION AND SEDIMENT CONTROL PERMIT (ESCP)
 DEP/CONSERVATION DISTRICT CHECKLIST**

OFFICIAL USE ONLY

Application ID#

CHECKLIST FOR <u>NEW</u> ESCP APPLICATIONS ONLY		Check <input type="checkbox"/> If Included
	Requirement	
1.	Fully completed, properly signed and notarized ESCP Application Form (1 original and 2 copies).	<input type="checkbox"/>
2.	Fully completed General Information Form (GIF) (one original and one copy)	<input type="checkbox"/>
3.	Three complete Erosion and Sediment Control Plans.	<input type="checkbox"/>
	Location: Drawings (D), Narrative (N).	
a.	Topographic features Location: _____ Page: _____	<input type="checkbox"/>
b.	Soils information Location: _____ Page: _____	<input type="checkbox"/>
c.	Proposed alteration Location: _____ Page: _____	<input type="checkbox"/>
d.	Amount of runoff Location: _____ Page: _____	<input type="checkbox"/>
e.	Location of water which may receive runoff and receiving water classification pursuant to Chapter 93 and the "statewide existing use listing". Location: _____ Page: _____	<input type="checkbox"/>
f.	Supporting calculations Location: _____ Page: _____	<input type="checkbox"/>
g.	BMPs used before, during, and after earth disturbance, including Special Protection BMPs. Location: _____ Page: _____	<input type="checkbox"/>
h.	Maintenance program Location: _____ Page: _____	<input type="checkbox"/>
i.	Plan drawings and narratives Location: _____ Page: _____	<input type="checkbox"/>
j.	Sequence of BMP installation and removal Location: _____ Page: _____	<input type="checkbox"/>
k.	Recycling and disposal methods Location: _____ Page: _____	<input type="checkbox"/>
4.	Permit filing fee of \$500.00 payable to the "Commonwealth of Pennsylvania Clean Water Fund." OR "_____ County Conservation District, Clean Water Fund."	<input type="checkbox"/>
5.	Location map: USGS of scale 1:24,000 indicating project location and boundaries.	<input type="checkbox"/>
6.	Complete Act 14 notifications to the local municipality and county government that specify that the application is for an ESCP.	<input type="checkbox"/>
7.	Proof of receipt of Act 14 notifications; copies of certified mail receipts or acknowledgment letters from the local municipality and county government.	<input type="checkbox"/>
8.	Completed PNDI Supplement No. 1, Form 3630-PM-WQ0041	<input type="checkbox"/>
9.	Copy of Cultural Resources Notice (0120-PM-PY0003) including PHMC reply or certified mail receipt.	<input type="checkbox"/>
CHECKLIST FOR ESCP <u>RENEWALS</u> ONLY		
	Requirement	
1.	Only items 1 through 7 are required. 1 copy of the Plan and Narrative is required.	<input type="checkbox"/>