STORMWATER MANAGEMENT WORKSHEET

DOES THIS PROJECT INVOLVE ANY OF THE FOLLOWING:

YES  NO

☐ ☐ CLEARING, GRUBBING, GRADING OR STRIPPING OF LAND WHICH AFFECTS MORE THAN 5,000 SQUARE FEET OF GROUND SURFACE.

☐ ☐ EXCAVATION OR FILLING INVOLVING MORE THAN 200 CUBIC YARDS OF MATERIAL WITHIN ANY PARCEL OR CONTIGUOUS AREA.

☐ ☐ SITE PREPARATION ON SLOPES WHICH EXCEED 10 FEET VERTICAL RISE TO 100 FEET OF HORIZONTAL DISTANCE.

☐ ☐ SITE PREPARATION WITHIN 100 FEET OF WETLANDS, BEACH, BLUFF OR COASTAL EROSION HAZARD AREA.

☐ ☐ SITE PREPARATION WITHIN THE ONE-HUNDRED-YEAR FLOODPLAIN AS DEPICTED ON F.I.R.M. MAP OF ANY WATERCOURSE.

☐ ☐ INSTALLATION OF NEW OR RESURFACED IMPERVIOUS SURFACES OF 1000 SQUARE FEET OR MORE, UNLESS PRIOR APPROVAL OF A STORMWATER MANAGEMENT CONTROL PLAN WAS RECEIVED BY THE TOWN AND THE PROPOSAL INCLUDES IN-KIND REPLACEMENT OF IMPERVIOUS SURFACES.

IF YOU ANSWERED NO TO ALL THE QUESTIONS ABOVE, STOP! COMPLETE THE APPLICANT SECTION BELOW WITH YOUR NAME, SIGNATURE, CONTACT INFORMATION, DATE AND COUNTY TAX MAP NUMBER. THIS DOES NOT APPLY TO YOUR PROJECT.

IF YOU ANSWERED YES TO ONE OR MORE OF THE ABOVE, PLEASE SUBMIT TWO COPIES OF A STORMWATER MANAGEMENT PLAN AND A COMPLETED CHECKLIST FORM TO THE BUILDING DEPARTMENT WITH YOUR BUILDING PERMIT APPLICATION.

Applicant

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<thead>
<tr>
<th>TAX MAP</th>
<th>SECTION:</th>
<th>BLOCK:</th>
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NAME: ………………………………………………

(PRINT)

……………………………………………

(SIGNATURE)

TELEPHONE: ………………………………………

EMAIL: ………………………………………

Property Address/Location of Construction Work

………………………………………………

………………………………………………

For Official Use

REVIEWED BY: …………………………… DATE: …………………

APPROVED: ………….. NOT APPROVED: ……………………………