

OFFICE USE: SMP# \_\_\_\_\_ - \_\_\_\_\_

APPLICATION FOR STORMWATER MANAGEMENT PERMIT  
TOWN OF WILMINGTON, MASSACHUSETTS

The undersigned hereby submits the attached Stormwater Management Plan, Erosion and Sediment Control Plan, Operation and Maintenance Plan and supporting documents Section 51 of the Inhabitant Bylaw of the Town of Wilmington and the Rules and Regulations adopted thereunder.

Name, address and telephone number of all persons having a legal interest in the property:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Must be an original signature of persons having a legal interest in the property)

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_

Please attach additional sheets for names not accommodated by the application.

Contact Information for responsible party including a telephone number available 24 hours per day:

Name: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_

Project Location (Address): \_\_\_\_\_

Assessor's Map(s) \_\_\_\_\_ Parcel(s) \_\_\_\_\_

Zoning Classification:	R-10	[ ]	R-20	[ ]	R-60	[ ]
	NB	[ ]	GB	[ ]	GI	[ ]
	CBD	[ ]			HI	[ ]

Groundwater Protection District Yes [ ] No [ ]

Proposed Principal Use:

(3. . ) \_\_\_\_\_  
(From Table 1, Wilmington Zoning Bylaw)

Filing: Subdivision Plan [ ] Site Plan [ ] with Conservation Commission [ ]

Brief description of project:

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Estimated amount of disturbance: \_\_\_\_\_ s.f.

Description of how and where stormwater will be controlled:

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Recharge Criteria:

Describe briefly proposed recharge: \_\_\_\_\_

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New subdivision		New single lot residential development
New commercial or industrial development		Commercial or industrial redevelopment
Will 150% recharge as defined in Appendix E be satisfied?    yes [ ]    no [ ]		Will 100% recharge as defined in Appendix E be satisfied?    yes [ ]    no [ ]

I (we) understand that the submittal of this application authorizes members and agents of the Planning Board or its designee to conduct site visits, monitor site construction work and monitor the Operation and Maintenance Plan submitted with this application.

Signature of owner: \_\_\_\_\_

Signature of owner: \_\_\_\_\_

Signature of Professional  
Engineer: \_\_\_\_\_

\_\_\_\_\_  
(Typed/Printed)

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date received by the Planning & Conservation Department:

\_\_\_\_\_