

APPLICATION FOR EXCAVATION AND FILL PERMIT

UPPER ALLEN TOWNSHIP

100 Gettysburg Pike Mechanicsburg, PA 17055 www.uatwp.org

COMMUNITY DEVELOPMENT DEPARTMENT

Office Hours: Monday through Friday: 8:00 AM to 4:30 PM

Office: 717-766-0756 Fax: 717-796-9833

Permit No.	

PERMIT & FEES: A permit is required if two cubic yards or more of earth or material are moved (CH. 129). There is a \$40 permit fee due once the permit has been approved. Payment may be made by check or cash payable to Upper Allen Township. Fees are subject to change- at any time by Resolution from the Board of Commissioners.

REVOCATION: Any permit granted under this chapter may be revoked by the Manager for any reason for which the issuance of a permit might be lawfully denied or for the failure of the contractor to comply with any of the terms or conditions of the permit. **APPEALS:** Appeals can be heard at the next succeeding regular or special meeting of the Board of Commissioners held more than 30 days after the filing of the appeal.

Owner _____ Address ____

State Zip Code Phone Email

Contrac	tor		Address				
State	Zip Code	Phone	Email				
Site addr	ess						
Location	/description of prope	erty involved					
Exact na	ture of the proposed	excavation or fill					
Slope of	sides		Level of finished surface				
Type of	earth or material to b	e moved					
Method,	Manner & equipmer	nt to be used					
Dispositi	ion of material at site						
Work co	mmencement date _		Work completion date				
Amount	of fill to moved (cubi	c yards)	Disturbed Area (square f	eet)			
	& Sedimentation Con l if disturbed area is gre	ntrol Plan attached? eater than 5,000 Sq. Ft)			YES		NO
			other special flood hazard area? Building & Zoning Permit are required	<i>d</i> . □	YES		NO
hereby ag therefore,	reed that if the excavati the work may be comp	on or fill is not completed leted by the Township, the	we been notified of the intention to apply to in accordance with the plans and specific e cost thereof to be paid by the contractor and expenses which may result from or be	cations ; and t	therefore hat the To	and the jownship a	permit issued and its agents
Signature o	of Owner		Date				
Signature o	of Contractor	·	Date				



This page to be completed by the Township.

FOR OFFICE USE ONLY:				
APP COMPLETE: $\Box Y \Box N$	RETURNED: $\Box Y \Box N$	APPROVED BY:		PERMIT #:
D : 15			D : 1	
Required Fee		_	Paid	
Plans				
Proposed Plans Required		_	Submitted	
Board of Commissioners Approve	al			
Obtained				
As-Built Plans Required				
Erosion & Sedimentation Control	Plan attached?		☐ YES	□ NO
Property located in a floodplain, f	loodway or other special flo	od hazard area?	☐ YES	□ NO
If yes, Zoning Permit #_				
Approved			Disapproved	
Additional Conditions	. 1 0	1 . N.C.4. C.	1	. 1 1 1
Final grading inspection	on required. Contact	t the MS4 Co	<u>oordinator</u>	to schedule an
appointment.				
Signature of Township Official			Date	

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