Updated: 5/8/14

## TOWNSHIP OF ROSTRAVER – BOARD OF COMMISSIONERS APPLICATION FOR STORMWATER MANAGEMENT EXEMPTION

Date of Application:	
Original Permit No.:	Exemption No.:
Property Address:	
Tax Assessment No.: <u>56-</u>	Zoning:
Project Name:	
Property Owner:	
Address:	
	Fax: <u>()</u>
Engineer:	
Address:	
Phone: ()	
	·
(Make check payable to Rostraver Town	·
I hereby affirm that the above inf	formation is true and correct and the stormwate applied within accordance with all applicable Township
REVIEW OF APPLICAT	TION AND ISSUANCE OF EXEMPTION
The application is hereby approved an	nd the exemption is issued onthe following reason(s) on
TOWNSHIP OF ROSTRAVER WESTMORELAND, PA	Rostraver Township Engineer
	Rosiraver Township Engineer

NOTICE: THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO DISCLOSURE