

ACT 537 COUNTY PLANNING REFERRAL

To: Chester County Planning Commission

(To Be Completed by Municipality)

Subject: Request for review of a Sewage Facilities Planning Module pursuant to the Pennsylvania Sewage Facilities Act, Act 537.

From: (Municipality) _____

Date: _____

Official's Name: _____

Position: _____

Signature: _____

This application must be completed by the municipality and submitted along with the appropriate Planning Module and accompanying documents for review.

Development Name: _____

*Department of Environmental Protection Code #: _____

Applicant's Name: _____

Address: _____

Phone #: _____

Engineer/Consultant: _____

Address: _____

Phone #: _____

Type of Submission

- Component 2
- Component 3
- Component 3z

There is no review fee for Chester County Planning Commission review of sewage facilities Planning Modules.

The County Planning Commission does not review Component 1 modules.

If your municipality needs more referral forms, please check here

*DEP Code Number can be obtained from the module submitted by the applicant.