

**FORM SWP**  
**APPLICATION FOR STORMWATER PERMIT**

Date \_\_\_\_\_

Pursuant to the provisions of Chapter 200 of the Bylaws of the Town of South Hadley, the undersigned herewith submits the accompanying application for a Stormwater Management Permit as described below and detailed in the supporting documentation which is incorporated into and made part of this application.

**PROJECT/SITE INFORMATION**

1. Project/Site Name: \_\_\_\_\_
2. Project/Site Location (Street Address): \_\_\_\_\_
3. Assessor's Map # \_\_\_\_\_ Parcel # \_\_\_\_\_
4. The subject property is presently in zoning district(s) – Sec 255-11: \_\_\_\_\_
5. Is the property in an Overlay District(s) (Sect 255-15)? \_\_\_\_ If so, what Overlay District(s): \_\_\_\_\_
6. Total Parcel Size (square feet): \_\_\_\_\_
7. Estimated Amount of Area to be Disturbed (square feet): \_\_\_\_\_
8. Total Area of Impervious Surfaces (square feet):
  - a. Existing: \_\_\_\_\_
  - b. Proposed: \_\_\_\_\_
9. Date Site Plan, Special Permit, or Definitive Subdivision Plan was approved: \_\_\_\_\_
  - a. If approved, please attach a copy of Planning Board Approval. \_\_\_\_\_
  - b. Or, Is Application for Site Plan, Special Permit, or Definitive Subdivision Plan Approval being submitted concurrent with this application? \_\_\_\_\_
10. General Description of Project \_\_\_\_\_

**APPLICANT INFORMATION**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_


**OWNER INFORMATION** *(if different from Applicant)*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**CONSULTING ENGINEER INFORMATION**

Name: R Levesque Associates, Inc. - Filipe J. Cravo, P.E.  
Address 40 School Street, Westfield, MA 01085  
Telephone 413-568-0985 Email Address: FilipeC@rlaland.com

I, as applicant, certify that the application and all attachments are correct and complete.

      08/15/2025  
Signature of Applicant      Date

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**FOR PLANNING DEPARTMENT OFFICE USE:**

Amount of Application Fee: \_\_\_\_\_ Fee Paid? Yes \_\_\_\_\_ No \_\_\_\_\_

Town Clerk: \_\_\_\_\_

Date of Submission \_\_\_\_\_

Signature \_\_\_\_\_