

**Alternative BMP Submission Form
 December 13, 2018**

This form is to be completed and submitted with all proposals for alternative best management practices (BMPs) for evaluation by Department of Environmental Protection (DEP) staff. Submit one form per BMP. DEP prefers electronic submissions to RA-EPALTERNATIVEBMP@pa.gov.

If sufficient space is not provided, attach additional pages as necessary. If a question or section of this form is not applicable, enter "N/A".

MANUFACTURER INFORMATION		
Manufacturer Name:		
Manufacturer Address:		
City:	State:	Zip Code:
Contact Name:	Contact Telephone:	Contact Email:
ALTERNATIVE BMP INFORMATION		
Alternative BMP Name:		
Type of BMP: <input type="checkbox"/> E&S <input type="checkbox"/> PCSM		
BMP Description:		
BMP Website:		
Is the BMP currently installed and utilized with Pennsylvania? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, identify where:		

Has the BMP been approved in another State(s)? Yes No

If Yes, identify the State(s) and contact for that State:

Outstanding Features and Benefits, Advantages and Disadvantages, and Limitations:

Generic Material Composition Description:

Does the BMP contain any chemicals such as flocculants, PAMs, soil binders, etc.?

Yes No

If Yes, describe/identify chemical and amount of chemical:

If Yes, is the BMP NSF approved? Yes No

If Yes, attach approval.

Has the BMP been tested by a third party? Yes No

If Yes, identify whom performed the testing:

Company Name:

Address:

City:

State:

Zip Code:

Contact Name:

Telephone:

Email:

Accreditation(s):

Product Testing Standards:

AASHTO:

ASTM:

Other:

Will special equipment be required to install the BMP? Yes No

If Yes, identify the equipment:

Are there educational courses or videos available for the BMP? Yes No

If Yes, identify location (e.g., website):

Provide any additional information for DEP to evaluate the BMP:

Provide generic BMP name:

Provide generic BMP description:

E&S BMP

What type of surface waters will this BMP be able to discharge to (check all that apply):

Non-Special High Quality Exceptional Value

Is there a similar BMP in the Erosion and Sediment Pollution Control Program Manual?

Yes No

If Yes, identify the similar BMP:

Provide any additional information for DEP to evaluate the BMP related to E&S:

PCSM BMP

What type of surface waters will this product be able to discharge to (check all that apply):

Non-special High Quality Exceptional Value

What is the primary function of the BMP?

Water Quality Management Volume Reduction Rate Management

List any secondary or additional functions of the BMP:

Is there a similar BMP in the Stormwater BMP Manual?

Yes No

If Yes, identify the similar BMP:

Potential Pollutant Removal Efficiencies based on performance testing:

TSS:

TP:

NO₃:

Provide any additional information for DEP to evaluate the BMP related to PCSM:

Alternative BMP Submission Review Checklist			
Included	Item	Official Use	
		Provided	Not Provided
<input type="checkbox"/>	Alternative BMP Submission Form	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Specifications	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Drawing / Detail	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Installation Instructions	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Maintenance Instructions	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Warranty Information	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Longevity Information (i.e., BMP Life Span)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Material Safety Data Sheets	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Material / Literature	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Testing Data / Information	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Photographs / Videos	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Guidelines for Determining Failure	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	BMP Sizing Information	<input type="checkbox"/>	<input type="checkbox"/>

OFFICIAL USE – ALTERNATIVE BMP REVIEW

Alternative BMP Submission Received:

Additional Information Requested from
Manufacturer:

Additional Information Received from
Manufacturer:

BMP Recommendation from Staff:

Approval Denial

Signature:

Date:

If Approval, if is it conditional: Yes No

Justification:

Section Chief Recommendation:

Approval Denial

Signature:

Date:

Division Chief Decision:

Approved Denied

Signature:

Date:

Date added to Alternative E&S and BMP list: