

Application For Stormwater BMP As-Built Acceptance

Town of Pittsboro

635 East Street Pittsboro, NC 27312

Phone: (919) 542-4621 Fax: (919) 542-7109

SUBMITTAL REQUIREMENTS

- **Completed Forms & Documentation:** 2 copies
 - *Application Form, Signed & Sealed by certifying professionals, completed submittal checklist, and associated documentation*
- **Plan Sets:** 2 copies (Folded)
 - *Must include strike-through updates of all items on the approved Construction Drawing plan sheet*
- **Stormwater Management Report:** 2 copies (Bound)
 - *Must include strike-through updates of all items in the report approved with the Construction Drawings*
 - *Include a digital (.pdf) copy on the submittal CD*
- **Application Fee:** See current fee schedule

PROJECT DESCRIPTION

Development Name: _____

Location: _____

Chatham County PIN: _____ Parcel ID: _____

Total acres: _____

Stormwater Permit Number: _____

BMP ID(s) _____

APPLICANT/DEVELOPER

Name: _____ Phone: _____

Company : _____

Address: _____

Email: _____

PROPERTY OWNER (If different from Applicant)

Name: _____ Phone: _____

Address: _____

Email: _____

DESIGNER (Must be a NC Engineer/Surveyor/Soil Scientist/Landscape Architect)

Name: _____ Phone: _____

Company: _____

Address: _____

Email: _____

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Complete the following checklist to ensure all applicable items are included with the submittal.

Description (provide one copy of each item)	Provided	N/A	Reviewer*
Plan Set with updated survey & constructed facility data**	<input type="checkbox"/>	<input type="checkbox"/>	
Updated Stormwater Report with constructed data***	<input type="checkbox"/>	<input type="checkbox"/>	
Geotechnical Certification and associated Field Inspection Reports	<input type="checkbox"/>	<input type="checkbox"/>	
Shallow High Water determination	<input type="checkbox"/>	<input type="checkbox"/>	
Soil Media Mix testing and gradation certification	<input type="checkbox"/>	<input type="checkbox"/>	
Copy of Recorded BMP Operation & Maintenance Agreement	<input type="checkbox"/>	<input type="checkbox"/>	
Confirmation of Maintenance Security	<input type="checkbox"/>	<input type="checkbox"/>	
Copy of the Approved Stormwater Permit	<input type="checkbox"/>	<input type="checkbox"/>	
Copy(s) of approved revisions	<input type="checkbox"/>	<input type="checkbox"/>	
Application Fee: Amount =	<input type="checkbox"/>	<input type="checkbox"/>	

*For Office Use Only

**Design info shall be stricken, survey points shown, and design storm elevations shown as contours in the plan view of the facility

***Design info shall be stricken

Complete the following information for each BMP identified. If there are more than three BMPS in the project simply attach additional sheets.

BMP Information	BMP ID		BMP ID		BMP ID	
	Approved*	As-Built	Approved*	As-Built	Approved*	As-Built
BMP Type						
Total Drainage Area (sf)						
On-site Drainage Area (sf)						
Off-site Drainage Area (sf)						
Impervious Area (sf)						
% Impervious Area (total)						
1" Water Quality Volume (cf)						
1" WQV Elevation (ft)						
1" WQV Drawdown (days)						
1-Yr Storm Runoff Rate (cfs)						
1-Yr Storm Runoff Elev. (ft)						
10-Yr Storm Runoff Rate (cfs)						
10-Yr Storm Runoff Elev. (ft)						
100-Yr Storm Runoff Rate (cfs)						
100-Yr Storm Runoff Elev. (ft)						
100-Yr Freeboard (ft)						

*Provide information from the approved Stormwater Management Report, including any revisions. Any variations from this must be noted and brought to the attention of the Stormwater Administrator prior to submittal

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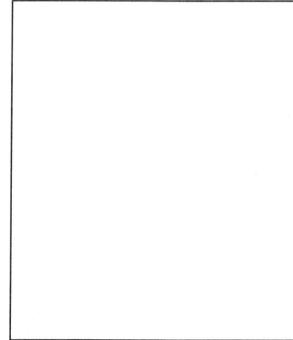
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DESIGNER'S CERTIFICATION

I, _____, certify that the information included on this As-built Acceptance application form is, to the best of my knowledge, correct and that the project has been constructed in conformance with the approved plans and that the proposed project complies with the requirements of the applicable stormwater rules required by the Town of Pittsboro.

Signature: _____

Date: _____



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SURVEYOR INFORMATION (if different from Designer)

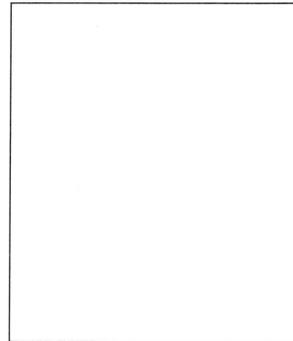
Surveyor's Name:	_____				
Surveying Firm:	_____				
Mailing Address:	_____				
City:	_____	State:	_____	Zip:	_____
Phone:	_____	Fax:	_____		
Email:	_____				

SURVEYOR'S CERTIFICATION

I, _____, certify that the information included with this application form is, to the best of my knowledge, correct and complies with the requirements of the applicable stormwater rules required by the Town of Pittsboro.

Signature: _____

Date: _____



SEAL