

Stormwater Management Facility Data

Project _____

Nearest Road _____ SWM Permit # _____

Owner _____ Phone _____

Address _____

Engineer/Consultant _____ Phone _____

Old ADC Grid _____ Key Sheet _____ Position Sheet _____

Watershed _____

Election Dist. _____ Councilmanic Dist. _____

MD State 83 N (Y) Coordinate _____ MD State 83 E (X) Coordinate _____

Deed Reference _____ Land Area (Easements) _____

Facility (type) _____ (choose only 1)

Public or Private Facility MD-378 Yes or No

Barrel Type _____ Non Circular Barrel Longest Dimension (In) _____

Drainage Area (Ft²) _____ Drainage Area (Ac) _____

Impervious Surface (Ft²) _____ Impervious Surface (Ac) _____

Total Site Area (Ac) _____ Runoff Curve Number _____ Riser Type _____

Design Storm(s) 1 yr (C_p), 2 yr (Q_{p2}), 25 yr, 10 yr (Q_{p10}), 100 yr (Q_f), ESD_v, Re_v, WQ_v

Infiltrate Yes or No Storage Volume (Ac Ft) _____
@ 100 Yr Storm (MD378); WQ WS Elev. (WQ Fac)

Land Use _____ Use MD Office of Planning Use Code Name

WQ Volume _____ Rainfall depth in inches managed by the practice (PE)

Construction Purpose Conversion, New Development, Redevelopment, Restoration (choose only 1)

On or Off Site Structures

Comments _____

Office Use Only

Facility # _____ Project I.D. _____

Reviewer _____ SCD Plan # _____

EPS Approval Date ____/____/____ SCD Approval Date ____/____/____