SAGINAW COUNTY
STORMWATER DISCHARGE PERMIT APPLICATION

PROJECT NAME:	
Property Tax Identification #:	
Site Plan Review Date:	
Date Applied:	
Deposit Amount Submitted:	

NAME OF DEVELOPER/OWNER:	**ENGINEER/ARCHITECT:**
Contact Person:	Contact Person:
Street Address:	Street Address:
City, State, Zip:	City, State, Zip:
Telephone:	Telephone:
Email:	Email:

PROJECT LOCATION:

Street Address:

Name of Subdivision/Plat:

Drainage District:

All cells noted correspond with the General Stormwater Calculations spreadsheet

STORMWATER DESIGN INFORMATION (*Calculations must be submitted for verification. Calculations must have clearly labeled headings, formulas, and units.)

Type of Development (Circle): *COMMERCIAL SITE, INDUSTRIAL SITE, RESIDENTIAL PLATTED, RESIDENTIAL CONDOMINIUM, OTHER*

AREA OF DEVELOPMENT (acres):	
CONTRIBUTING DRAINAGE AREA (A) (acres):	Runoff Coef. tab - cell D15, general stormwater tab - cell D7
AREA OF EXISTING IMPERVIOUS SURFACE (acres):	
AREA OF PROPOSED IMPERVIOUS SURFACE (acres):	
ALLOWABLE 10-YR DISCHARGE RATE (Q_a) (cfs):	General stormwater tab - cell D11
HEAD DIFFERENTIAL THROUGH 10-YR RESTRICTOR (ft.):	General stormwater tab - cell D29 - from center of 10-yr outlet to 10-year high water level
ACTUAL 10-YR RESTRICTED DISCHARGE RATE (Q_r) (cfs):	General stormwater tab - cell D47
TOTAL VOLUME OF 10-YR STORAGE REQUIRED (V_t) (cu. ft.):	General stormwater tab - cell D74
TOTAL VOLUME OF 10-YR STORAGE PROVIDED (cu. ft.):	General stormwater tab - cell D76
10 YR DESIGN DETENTION HIGH WATER STORAGE ELEVATION (ft):	Same elevation as the crest for emergency overflow
REQUIRED WATER QUALITY VOLUME (V_{WQ}) (cu. ft.):	General stormwater tab - cell D89
PROVIDED WATER QUALITY VOLUME (cu. ft.):	Provide stage-storage calcs. to show volume provided
ALLOWABLE WATER QUALITY RELEASE RATE (Q_{ff}) (cfs):	General stormwater tab - cell D94
DIAMETER OF PROPOSED WATER QUALITY RESTRICTOR (in.):	General stormwater tab - cell D106
ACTUAL WATER QUALITY RESTRICTED DISCHARGE RATE (actual Q_{ff}) (cfs):	General stormwater tab - cell D109
WATER QUALITY VOLUME HIGH WATER STORAGE ELEVATION (ft.):	General stormwater tab - cell D99
WATER QUALITY HOLDING TIME (hrs):	General stormwater tab - cell B93
EMERGENCY OVERFLOW CAPACITY REQUIRED (Q) (cfs):	General stormwater tab - cell D84
EMERGENCY OVERFLOW CAPACITY PROVIDED (cfs):	Provide calcs. to show capacity
EMERGENCY OVERFLOW ELEVATION (ft):	Same as 10-year high water level
OUTLET SIZE AND DESIGN FLOW CAPACITY (in., cfs):	Provide for both 10-year outlet & water quality outlet
OUTLET INVERT ELEVATION:	
LOWEST FINISHED FLOOR ELEVATION:	
Latitude and Longitude of outfall to county drain or MS4	
AUTHORIZED SIGNATURE DATE	PLEASE COMPLETE THE DRAINAGE PLAN CHECKLIST TO ASSURE ALL INFORMATION IS PRESENT FOR REVIEW

Provide additional supporting calculations for the following: stage-storage calculations to show both water quality volume and 10-year flood volume provided; capacity of emergency overflow outlet/spillway/weir.