

Attachment #6

Stormwater Management Checklist

<input type="checkbox"/>	SUBDIVISION APPLICATION	Project Name	_____
<input type="checkbox"/>	Date of Submittal ___/___/_____	Applicant's Name	_____
<input type="checkbox"/>	Engineer	_____	Architect _____
<input type="checkbox"/>	New Development	<input type="checkbox"/>	Re-Development
<input type="checkbox"/>	Total Area of Disturbance _____ Square Feet (SF)		
<input type="checkbox"/>	< 10,000 SF and No Water Quality Threat {No Stormwater Management Plan Required}		
<input type="checkbox"/>	< 10,000 SF and Possible Water Quality Threat {Stormwater Management Plan Required}		
<input type="checkbox"/>	> 10,000 SF {Stormwater Management Plan Required except as provided for in 9.03 (A) with an approved AOT permit }		
STORMWATER MANAGEMENT PLAN – PART I			
<input type="checkbox"/>	EXISTING CONDITIONS PLAN		
<input type="checkbox"/>	Title Block, Appropriate Scale, Legend, Datum, Locus Plan, Professional Stamp(s)		
<input type="checkbox"/>	Topographic Contours and benchmarks		
<input type="checkbox"/>	Buildings, Structures, Wells, Septic Systems, Utilities		
<input type="checkbox"/>	Water Bodies, Wetlands, Hydrologic Features, Soil Codes, Buffer Zone		
<input type="checkbox"/>	Area of Impervious Surface _____SF		
<input type="checkbox"/>	Total Area of Pavement _____SF	Area of Pervious Pavement _____SF	
<input type="checkbox"/>	PROPOSED CONDITIONS PLAN (include above existing and below proposed features)		
<input type="checkbox"/>	Title Block, Appropriate Scale, Legend, Datums, Locus Plan, Professional Stamp(s)		
<input type="checkbox"/>	Topographic Contours and benchmarks		
<input type="checkbox"/>	Buildings, Structures, Wells, Septic Systems, Utilities		
<input type="checkbox"/>	Water Bodies, Wetlands, Hydrologic Features, Soil Codes, Buffer Zone		
<input type="checkbox"/>	Impervious Surface Area _____ SF	Impervious Surface Increase _____SF	
<input type="checkbox"/>	Total Area of Pavement _____SF	Area of Pervious Pavement _____SF	
<input type="checkbox"/>	Effective Impervious Area (EIA) _____ SF		
<input type="checkbox"/>	Stormwater Management & Treatment System (Describe System Elements Below)		
<input type="checkbox"/>	Name of Receiving Waterbody _____		
<input type="checkbox"/>	Closed Drain & Catch Basin Network	<input type="checkbox"/>	Connected to Town Closed System
<input type="checkbox"/>	Detention Structure Types _____		
<input type="checkbox"/>	Structural BMP Types _____		
<input type="checkbox"/>	LID Strategies _____		
<input type="checkbox"/>	Estimated Value of Parts to be Town Owned and/or Maintained		\$ _____
STORMWATER MANAGEMENT PLAN – PART II			

<input type="checkbox"/>	DRAINAGE ANALYSIS			
	24-Hour Storm Event	Runoff	Pre-Development	Post-Development
<input type="checkbox"/>	1-inch	Rate	_____ Feet ³ /Sec (CFS)	_____ CFS
<input type="checkbox"/>	1-inch	Volume	_____ Feet ³ (CF)	_____ CF
<input type="checkbox"/>	2-Year	Rate	_____ CFS	_____ CFS
<input type="checkbox"/>	2-Year	Volume	_____ CF	_____ CF
<input type="checkbox"/>	10-Year	Rate	_____ CFS	_____ CFS
<input type="checkbox"/>	10-Year	Volume	_____ CF	_____ CF
<input type="checkbox"/>	25-Year	Rate	_____ CFS	_____ CFS
<input type="checkbox"/>	25-Year	Volume	_____ CF	_____ CF
<input type="checkbox"/>	100-Year	Rate	_____ CFS	_____ CFS
<input type="checkbox"/>	EROSION & SEDIMENT CONTROL PLAN			
<input type="checkbox"/>	OTHER PERMITS OR PLANS REQUIRED BY USEPA or NHDES (Where applicable)			
<input type="checkbox"/>	USEPA Pre- and Post-Construction Stormwater Pollution Prevention Plan			
<input type="checkbox"/>	NHDES Alteration of Terrain Permit			
<input type="checkbox"/>	Other (Please list) _____			
<input type="checkbox"/>	OPERATION & MAINTENANCE PLAN			
<input type="checkbox"/>	Need for 3rd Party Review? YES _____ NO _____			