



City of Emeryville ◦ Department of Public Works
Stormwater Permit

PROJECT NAME: _____	Address: _____
APPLICANT: _____	OWNER/DEVELOPER: _____
Contact Person: _____	Contact Person: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
ARCHITECT: _____	CONTRACTOR: _____
Contact Person: _____	Contact Person: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

TWO COMPLETE SETS OF STORMWATER (C.3) PLANS MUST BE SUBMITTED WITH THIS FORM

Estimated Project Start Date: _____ Estimated Project Completion Date: _____
 Total Site Area (Ft²): _____ Total Land to be Disturbed (Ft²): _____
 Total Pre-Project Impervious Surface Area (Ft²): _____
 New Impervious Area Replacing Pervious Surface (Ft²): _____
 (Attach Impervious Surface Final Form)
 Total Replaced Impervious Surface Area (Ft²): _____
 Total Post-Project Impervious Surface Area (Ft²): _____

PROPOSED NUMBER OF STORMWATER TREATMENT AREAS: _____

I hereby agree to protect and indemnify the City of Emeryville and hold it harmless in every way from all claim or suits for injury or damage to persons or property as set forth in the Standard Provisions. I agree not to begin construction until all materials to be used are on hand; to perform all work in accordance with the plans submitted (if any), the Standard Provisions to this Stormwater Permit, and all applicable Special Conditions of Approval, and to pay all inspection and engineering costs in addition to those paid at the time of issuance of this permit. I further agree to complete the work to the satisfaction of the City Engineer and if for any reason the City of Emeryville is required to complete this work, I will pay all costs for such work.

SW Permit No. _____	Date _____
Permit Admin. Fee: \$184 _____	
Initial Deposit estimates:	
Plan Check Cost Recovery Estimate: _____	
Inspection Cost Recovery Estimate: _____	
Total Payment Required: _____	
Received: _____	Date: _____
Receipt # _____	
Additional Cost Recovery Estimate: _____	
Date Additional Required: _____	
Received: _____	Date: _____

After final inspection is approved, please contact the Public Works Department at (510) 596-4330 to determine final cost, and for final payment or reimbursement of deposit. Failure to obtain approval of a Final Inspection of the work covered by this Stormwater Permit within one year of the estimated completion date shall result in the loss of the security deposit, which shall be retained by the City of Emeryville.

Applicant Signature: _____ Date: _____

FOR CITY USE ONLY		
The following documents are attached and incorporated to the applicant:		
<input type="checkbox"/> Standard Provisions to Stormwater Permit	<input type="checkbox"/> City Standard Details	
<input type="checkbox"/> Other: _____		
Notes: _____		
<input type="checkbox"/> Provide 48 hour notice prior to start of work		
<input type="checkbox"/> Provide construction schedule 5 days prior to start of work		
<input type="checkbox"/> As-built plans required		
<input type="checkbox"/> Please call 48 hours in advance of inspection to schedule – (510) 585-5589		
This Permit is void unless the work is completed before this date: _____		
This Permit is to be strictly construed and no work not specifically mentioned is authorized.		
APPROVED _____	TITLE _____	DATE _____
FINAL INSPECTION APPROVED _____	TITLE _____	DATE _____

Please complete the following to the best of your knowledge at this time:

Date: _____

List and describe each treatment area or hydrozone on your project site below	For each area/zone, list Source Control Measures planned (1)	Site Design Measures (2) (list in zone to be located)	Treatment Systems (3)	Hydraulic Sizing Criteria ⁽⁴⁾	Hydromodification Controls (if being used) (5)	Notes, Comments

1: Examples include: properly designed trash storage areas; storm drain stenciling or signage; efficient landscape irrigation systems; etc.

2: Examples include: minimize impervious surfaces; conserve natural areas, including existing trees or other vegetation, and soils; construct sidewalks, walkways, and/or patios with permeable surfaces, etc.

3: Examples are: flow-through planter, bioretention facility, infiltration basin, etc

4. Go to p.30 Municipal Regional Permit @ http://www.swrcb.ca.gov/rwqcb2/board_decisions/adopted_orders/2009/R2-2009-0074.pdf and use one of the methods listed for sizing criteria

5. For Hydromodification Management requirements go to p.35 in the Municipal Regional Permit: http://www.swrcb.ca.gov/rwqcb2/board_decisions/adopted_orders/2009/R2-2009-0074.pdf

Call for inspections as indicated on Stormwater Inspection sheet.

Conditions of Approval for Stormwater Permit:

1. AS-BUILT PLANS are REQUIRED if different from original plans submitted to City.
2. Two signed copies of the completed Operations and Maintenance Agreement is due to the City in order to obtain final approval of this Stormwater Permit.

<p>FOR CITY USE ONLY</p> <p>FINAL INSPECTION APPROVAL:</p> <p><input type="checkbox"/> Operations and Maintenance Agreement received by staff (completed and filed with County)</p> <p><input type="checkbox"/> As-built plans received by staff</p> <p>_____</p> <p>Print Name and Position</p>	<p>Notes:</p> <p>_____</p> <p>Signature</p> <p>_____</p> <p>Date</p>
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