



# APPLICATION FOR STORMWATER CONTROL MEASURE AS-BUILT APPROVAL

## SUBMITTAL REQUIREMENTS

- **Completed Forms & Documentation:**
  - This application form, Signed & Sealed by certifying professionals, completed submittal checklist, and associated documentation
- **Plans:**
  - Must include strike-through updates of all items shown on the approved Construction Drawing SCM plan sheet(s). Do not include plan sheets that are unrelated to the SCM.
- **Stormwater Management Report\*:**
  - Must include strike-through updates of all items in the report approved with the Construction Drawings
- **Application Fee:** ◦ See [current fee schedule](#) in the Town's [Administrative Manual](#) 4.6.1.

PROJECT DESCRIPTION
Development Name: _____
Wake County PIN: _____ Real Estate ID: _____
SCM ID(s): _____
Project No.: _____

Complete the following Checklist to ensure all applicable items are included with the submittal. *Initial* in the appropriate box as to “Provided” or “not-applicable” and leave the “reviewer” column blank.

Information	Provided	N/A	Reviewer
Plans with updated survey & constructed facility data (design info shall be stricken & as-built survey points shown)			
Updated Stormwater Report* with constructed data (design info stricken)			
Geotech Certification & associated Field Inspection Reports			
Soil Media Mix testing & gradation certification			
Copy of approved bulletin/minor modification revisions			
Application Fee: Amount = _____ (see current fee schedule)			

*\*only required if revisions needed from approved report*

Has the Final Plat been recorded with Wake County?  Yes  No

Project No.: \_\_\_\_\_

Complete the following information for each SCM identified in the “Town SCM ID(s)” section above. If there are more than four SCMs in the project, attach an additional sheet with the information for each area provided in the same format as below.

SCM Information	SCM ID: _____		SCM ID: _____	
	Approved**	As-Built	Approved**	As-Built
SCM 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-Year Storm Runoff Rate (CFS)				
2-Year Storm Runoff Rate (CFS)				
10-Yr Storm Runoff Rate (CFS)				
100-Yr Freeboard (FT)				
SCM Information	SCM ID: _____		SCM ID: _____	
	Approved**	As-Built	Approved**	As-Built
SCM 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-Year Storm Runoff Rate (CFS)				
2-Year Storm Runoff Rate (CFS)				
10-Yr Storm Runoff Rate (CFS)				
100-Yr Freeboard (FT)				

**\*\* Provide information from the approved Stormwater Report, or bulletin/minor modification revisions. Any variations from this must be noted and brought to the attention of the Stormwater Engineer prior to submittal.**

Project No.: \_\_\_\_\_

**CONSULTANT INFORMATION AND CERTIFICATION**

Complete this section with the contact information for the certifying professional, and statement of compliance.

Consulting Engineer' Name:

\_\_\_\_\_

Consulting Firm:

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**ENGINEER'S CERTIFICATION**

I, *(print or type name of person listed in Contact Information)* \_\_\_\_\_, 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, which I have personally verified via a site inspection, and that the required deed restrictions, protective covenants, easements, and plats have been recorded, and that the proposed project complies with the requirements of the applicable stormwater rules required by the Town of Morrisville.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



SEAL

Project No.: \_\_\_\_\_

**SURVEYOR INFORMATION AND CERTIFICATION**

Complete this section with the contact information for the certifying professional, and statement of compliance.

Surveyor's Name:

\_\_\_\_\_

Surveyor Firm:

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

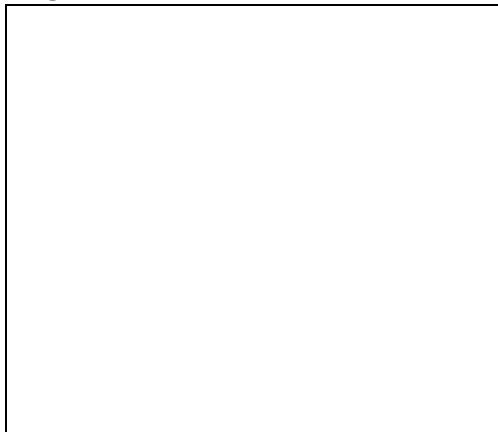
Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**SURVEYOR'S CERTIFICATION**

I, *(print or type name of person listed in Contact Information)* \_\_\_\_\_, certify that the information included with this application form is, to the best of my knowledge, correct and accurately represents the improvements constructed per the field survey, and are consistent with the information depicted in the Record Drawings.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



SEAL



# Morrisville

Stormwater

Project No.:

Developer/Builder Contact,

As we enter the final stages of as-built acceptance, we require that you provide information for the future Designated Contact for the SCM. We will need this information to send future correspondence (Annual SCM Inspection Report, Stormwater Utility Fee billing information, etc.) to the designated contact. Once we have this information and the SCM as-built is approved, the final As-built Acceptance letter will be sent to show completion of this phase.

Please provide the following information:

\*Name of Designated Contact

Company

\*Address

Phone number

\*Email

*\*Minimum required information*

Once we have this information, we will reach out to the designated contact to confirm they will be the responsible party moving forward. Thank you for your time and effort. Hope you have a wonderful day.