Project ID / Description:							
Reviewer / Date:							
					RMWATE IG applic	R SUBMITTAL CHECKLIST cations)	
В	BOLD ITEMS ARE REQUIRED AT TIME OF APPLICATION SUBMITTAL						
	Yes		<u>No</u>		<u>N/A</u>	ITEM OR DESCRIPTION	
F	orms						
						Completed Stormwater Evaluation Form (5 pages)	
						Completed Special Project Worksheet, narrative and affordable housing calculator (if applicable)	
Stormwater Control Plan					ol Plan		
						Area Table	
						Conceptual Drainage Management Areas (DMA)	
						Proposed Treatment Control Measure location for each DMA	
						Preliminary numeric sizing calculations	
						Treatment Control Measure Summary Table	
						Site information/conditions table (soil type, ground water depth, receiving water body, flood zone and elevation)	
						Site Design Measure notes	
						Source Control Measure notes	
						Hydromodification notes	
						Treatment Control Measure details and cross-sections	
						Operations and Maintenance information	
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