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+17-39 1/2° FEAK OF ROOF	<section-header><text><text><text><text><text><text><text></text></text></text></text></text></text></text></section-header>
	PROJECT NAME: <u>BERRY</u> <u>WAREHOUSE</u> 147 GREYSON LOOP POWELLS POINT CURRITUCK COUNTY NORTH CAROLINA
-1.7-9 1/2' PEAK OF ROOF	REVISIONS: DATE: CLIENT REVIEW 8 / 18 / 23 COUNTY REVIEW 8 / 22 / 23 DRAWING NAME: EXTERIOR ELEVATIONS
	NOT FOR CONSTRUCTION DRAWN BY: CN DATE: 8 / 22 / 23 SCALE: _
	STAMP: THIS COMPUTER FILE/DRAWING IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT INTENDED FOR CONSTRUCTION. DO NOT START CONSTRUCTION WITHOUT A SEALED SET OF CONSTRUCTION DOCUMENTS FROM THE ARCHITECT.
AGE DOOR BY AL BLDG. MFG. TYP. EXTERIOR WALL PANELS, TYP.	SHEET: A2.1



GENERAL NOTES:

	* SUBJECT PROPERTY:				
		LOT 26 CURRITUCK INDUSTRIAL PARK POPLAR BRANCH TOWNSHIP, CURRITUCK	COUNTY, NC		
	* STREET ADDRESS:	147 GREYSON LOOP CURRITUCK COUNTY, NC. 27966			
	* PARCEL ID NUMBER: * GLOBAL PIN:	123E00000260000 9838-47-1956			
	* RECORDED REFERENCE: * LOT AREA:	D.B. 1496, Pg. 899, P.C. I, SL. 279 41,637 SQ. FT. (Survey)			
	* FEMA DATA: COMMUNITY -	CURRITUCK COUNTY FIRM ZONE – AS SHOWN FLOOD ZONES SUBJECT TO CHANGE BY FEMA			
* SUBJECT PROPERTY ZONING:		LI (LIGHT INDUSTRIAL)			
	* BUILDING SETBACKS:	FRONT – 20' SIDE – 15' REAR – 25'			
	* PROPOSED DEVELOPMENT:	STORAGE WAREHOUSE 40' X 60' METAL I WITH INFRASTRUCTURE AND ASSOCIATED	BUILDING PARKING		
	* PARKING REQUIREMENTS:	3 EMPLOYEES 3 SPACES 1 SPACE / 2,500 SF 1 SPACES			
		4 SPACE REQUI 4 SPACE PROVI	RED DED		
	* IMPERVIOUS COVERAGE:				
		BUILDING	2,400 SQ. F		
		GRAVEL VEHICULAR CIRCULATION AREA	3943 SQ F		
		CONCRETE WALK	1,015 SQ. F		
	_				

TOTAL IMPERVIOUS COVERAGE

* SURVEY PREPARED BY SADDLER SURVEYING, PLLC

20"

STRAIGHT ARROW

______ ¥___ ¥

LOT AREA : 9,094/41,637 = 21.84%

9,094 SQ. FT.

V N

RIGHT OR LEFT TURN ARROW

WWW.nc811.ORG

SPREAD	MINIMUM SIZE @ PLANTING	QUANTITY	SYMBOL
20' – 30'	2" Cal. — 8' Ht.	4	
6' – 15'	1.5" Cal. — 6' Ht.	2	
3' – 6'	3 Gallon	8 REQUIRED 10 PROVIDED	R
3' – 6'	3 Gallon	26	

Michael W. Robinson, P.E., P.L.S.

August 17, 2023

Fire Hydrant Flow Testing

Fire Hydrant located at 147 Greyson Loop, Lot 26, Currituck Industrial Park 6" water main along the East Right of Way of Greyson Loop Poplar Branch Township, Currituck County, North Carolina Refer to Attached Exhibit A for line and hydrant locations

Test date: 05-11-2023 Time: 9:00 a.m. Test made by: Michael W. Robinson, P.E.

Test 1: Hydrant located at 147 Greyson Loop off 6" water main along the along the East Right of Way of Greyson Loop. Flow measured at Fire Hydrant A with static and residual pressures measured at Fire Hydrant B.

> Hydrant discharge coefficient = 0.80. Static Pressure at Hydrant B = 55 psig Direct read flow at Hydrant A (full open) = 1,030 gpm (pitot gauge) Residual Pressure during flow at Hydrant A = 48 psig

Calculated flow to 20 psi residual = 2,456 gpm (See Calculation form)

02-17-23

Michael W. Robinson P.E., P.L.S.

Michael W. Robinson P.E., P.L.S. P.O. Box 2852, Kill Devil Hills, NC 27948

P.O. Box 2852, Kill Devil Hills, NC 2794 252-255-8026 mrobinson@obxengineering.com

HYDRANT # & LOCATION 147 Grays			on Loop, Lot	26, Curritu	ck Industrial	Park	DATE:	8/17/2023
TEST BY:	Mike Robin	ison	Day or Week:	Thursday	TIME OF DAY	10:00 a.m.	MIN. OF FLOW:	1
WATER SUP	PLIED BY:	Currituck C	County Mainla	and Water				
PURPOSE O	F TEST:	Available F	Fire Flow at H	lydrant		_		
				<u>DATA</u>				
FLOW HY	DRANT(S)		В					
	SIZE OPENIN	NG:	2.5			_		
	COEFFICIEN	T:	0.8			_		
	PITOT READ	ING:	37			_		
	GPM:		1030			_		
TOTAL FLOV		ST:	1030	GPM				
STATIC REA	DING:	55	PSI		RESIDUAL:	48	PSI	
RESULTS:	AT 20 PSI RE	SIDUAL	2456	GPM		AT 0 PSI	3135	GPM
ESTIMATED CONSUMPTION:		1030	GAL.					
REMARKS:	REMARKS: See Report Exhibit A for Hydrant Location							

Static Pressure - Hydrant A

Direct Flow - Hydrant A

Residual Pressure During Flow- Hydrant B

	www.arhs-nc.org
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ALBEMARLE REGIONAL HEALTH SERVICES

APPLICATION FOR ENVIRONMENTAL SERVICES

County: Currituck

File#

Parcel Identification Number (for Site Evaluations only): 123E0000060000

Type of Service Requested:_____Site Evaluation/Improvement Permit for Wastewater System (\$225) Existing Wastewater System Inspection (\$60) Construction Authorization for Repair of Wastewater System (\$60)

 Applicant Name
 :
 Mancuso Development

 Mailing Address
 :
 610 Currituck Club House Dr Suite 7

 City/State/Zip
 :
 Corolla, Nc 27927

 Telephone Number
 :
 252-305-4663
 Fax:
 Email: jay@mancusodevelopment.com

Property Owner Name :	Lee Ann Leah & Bryan Berry	Check if same
Mailing Address :	104 Arnold Dr	— as Applicant
City/State/Zip :	Powells Point, Nc 27966	
Telephone Number :	252-599-1114	

Location of Property: (Directions if no address) 147 Greyson Loop

If Existing System Inspection; list size/type of new construction:

Type of Facility (House, Mobile Home, etc):

 Number of Bedrooms:
 Number of People:

Size of Property (acres): <u>.96</u> Plat or Site Plan provided (yes or no): _____

Type of Water Supply (public supply or private well): Public

THE APPLICANT SHALL MARK THE SITE AND MAKE THE SITE ACCESSIBLE FOR A SITE EVALUATION. A \$60.00 REVISIT FEE WILL BE CHARGED IF THE PROPERTY IS UNIDENTIFIBLE OR UNACCESSIBLE DUE TO VEGETATIVE OVERGROWTH, LOCKED GATES, LOOSE DOGS, ETC.

THE APPLICANT SHALL BE RESPONSIBLE FOR NOTIFYING THE HEALTH DEPARTMENT OF ANY DESIGNATED WETLANDS ON THE PROPERTY.

THE APPLICANT SHALL BE RESPONSIBLE FOR NOTIFYING THE HEALTH DEPARTMENT IF THERE IS WASTEWATER GENERATED ON THE SITE OTHER THAN DOMESTIC WASTEWATER.

IF THE INFORMATION SUBMITTED BY THE APPLICANT IS FOUND TO BE INCORRECT, OR IF THE SITE AND SOIL CONDITIONS ARE ALTERED, ANY IMPROVEMENT PERMIT SHALL BECOME INVALID.

PLEASE ALLOW UP TO 2 WEEKS FOR COMPLETION.

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to the property to conduct the services requested.

Date: 5/3/23

Owner or Agent Signature:

NOTE: A minimum additional fee of \$225.00 is required for the issuance of an Authorization for Wastewater System Construction on suitable lots where an Improvement Permit has been issued.

Mail To: ARHS Environmental Health; P.O. Box 189; Elizabeth City, NC 27907

Gates Co. P: (252) 357-1380 F: (252) 357-2251 **Pasquotank Co.** P: (252)338-4490 F: (252) 337-7921

Bertie Co.	Camden Co.	Chowan Co.	Currituck Co.	Hertford Co.	Perquimans Co.
P: (252) 794-5303	P: (252) 338-4460	P: (252) 482-1199	P: (252) 232-6603	P: (252) 862-4054	P: (252) 426-2100
F: (252) 794-5361	F: (252) 338-4475	F: (252) 482-6020	F: (252) 232-1912	F: (252) 862-4263	F: (252) 426-2104

4114 Laurel Ridge Drive Raleigh, North Carolina 27612 Protocol Sampling Service, Inc. "Experts in Environmental Compliance"

Protocolsampling@yahoo.com Environmentalservicesnc.com

August 23, 2023

Mr. Rick House, P.E. House Engineering, P.C. Post Office Box 466 Kitty Hawk, North Carolina 27949

Re: Soil Inspection – Stormwater – 147 Greyson Loop Lot 26, Currituck Industrial Park Powells Point, Currituck County, North Carolina Protocol Project No. 23-113

Dear Mr. House:

The subject property that will be developed as a warehouse facility was inspected by Protocol Sampling Service, Inc., personnel Monday, August 21, 2023. Protocol personnel inspected the lot by advancing two (2) soil borings for lithologic descriptions, depth to the seasonal high-water table and the depth to static water table in the proposed storm water infiltration areas.

The infiltration areas were found to be graded flat, with an average elevation of 9.0 feet msl. The seasonal high-water table was found from 36 to 48 inches below land surface and the static water table was not found to a depth of 60-inches below the soil surface across the study area. The soil matched the Conetoe soil series profile with excellent structure (granular), consistence (friable) and texture (loamy sand) at the seasonal high water table elevation of 6.0' msl. Given a 20% porosity value for the loamy sand surface soils and an infiltration rate of at least 1.0-inches/hour, the infiltration area should easily accept any storm water flow from the impervious areas.

Please call me at (919) 210-6547 if you have any questions or comments.

Sincerely, **Protocol Sampling Service, Inc.**

David E. Meyer, N.C.L.S.S.

David E. Meyer, N.C.L.S.S. President

cc: file

Soil Profile Description 147 Greyson Loop – Profile 1&2

- A 0-10 inches; dark brown (7.5YR 3/3) loamy fine sand; granular; friable.
- E 10-24 inches; yellowish brown (10YR 5/4) loamy sand; granular; friable.
- Bt 24 36 inches; brownish yellow (10YR 6/8) sandy loam; subangular blocky; friable.
- BC 36 45 inches; brownish yellow (10YR 6/8) and very pale brown (10YR 7/4) loamy sand with strong brown (7.5YR 5/6) concentrations and gray (10YR 6/1) depletions; subangular blocky; friable.
- C1 45 60 inches; brownish yellow (10YR 6/8) fine sand; single grained; loose
- C2 60-80 inches; light yellowish brown (10YR 6/4) fine sand; single grained; loose

Soil Series: **Conetoe** Landscape: Coastal Plain Landform: terrace Parent Material: Marine sediments Drainage Class: well drained Particle Size Class: sandy Temperature Regime: thermic Subgroup Classification: Arenic Hapludult Examination Method: auger boring Date: August 21, 2023 Weather: Sunny, 85° Investigators: David Meyer Shwt: 36-48" Measured water table depth: >60"

FIRE & RESCUE					Page 1/3	
	NFF = (Ci)(Oi)(Xi+Pi)					
					C=18F(Ai)^0.5	
Address:	147 Greyson Loop, Currituck County					
Project Name:	Berry Warehouse		Occupancy T	ype:	Mixed Use	
Const. Type:	VB Combustible		Number of St	ories:	1	
STEP 1	Take the area, which is 100% sq. ft. of the first of the total area of the other floors.	st floor plus t	the following	percentage	2	
	First Floor Area in Sq. Ft	2400	Sq. Ft. @ 100	1%		
	Additional Floors					
	Enter total area in sq. ft for all other floors	0]			
			4			
	Total Area Entire Building	2400				
STEP 2						
	F = Coefficient related to the class of constru construction type found in SBCCI	ction as dete	ermined by us	ng the		
	Construction Type	Class	F Value			
	Frame	1	1.5			
	Joist Masonry	2	1			
	Non-combustible	3	0.8			
	Heavy Timber	4	0.8			
	Modified fire resistance	5	0.6			
Fire resistive 6 0.6						
	Construction Class 1					
	Square Root of the Area x F x 18	1250	= C Value			

	FIRE & RESCUE	Page 2/3
	ISO Fire Flow Worksheet	
	Needed Fire Flow Work Sheet (ISO formulas)	
STEP 3	Multiply result of rounded off GPM by the Occupancy Factor (Oi)	Occupancy Factor
	Noncombustible (C-1) = No active fuel loads such as storage of asbestos, clay, glass, marble, stone, or metal products.	0.75
	Limited - Combustible (C-2) = Limited fuel loads such as airports, apartments, art studios, auto repair, auto showroom, aviaries, banks, barber shops, beauty shops, churches, clubs, cold storage warehouses, day care center, educational occupancies, gas stations, green houses, health clubs, hospitals, jails, libraries, medical labs, motels, museums, nursing homes, offices, radio stations, recreation centers, and rooming houses.	0.85
	Combustible (C-3) = Moderate fuel loads such as auto part stores, auto repair training center, bakery, bookstores, bowling centers, casinos, commercial laundries, contractor equipment storage, dry cleaners with no flammable fluids, leather processing, municipal storage buildings, nursery sales stores, pavilions, pet shops, photographic supplies, printers, restaurants, shoe repair, supermarkets, theaters, vacant buildings, and most wholesale & retail sales ocuppancies.	1.0
	Free-Burning (C-4) = Active fuel loads such as aircraft hangers, cabinet making, combustible metals, dry cleaners using flammable fluids, feed stores, furniture stores, kennels, lumber, packaging and crating, paper products manufacturing, petroleum bulk distribution centers, tire manufacturers, tire recapping or retreading, wax products, and wood working shops.	1.15
	Rapid-Burning (C-5) = Contents that burn with great intensity, spontaneously ignite, have flammable or explosive vapors, or large quantities of dust such as ammunition, feed mills, fireworks, flammable compressed gases, flammable liquids, flour mills, highly flammable solids, matches, mattress factories, nitrocellulose-based products, rag storage, upholstery shops, & waste paper storage.	1.25
	Occupancy Class Selected (1 thru 5)	
		Dogo 2/2
	FIRE & REDUUE	Page 3/3

	ISO Fire Flow Workshee	et				
	Needed Fire Flow Work Sheet (ISO formulas)					
STEP 4	Now consider the exposure factor (Xi) - (Sepa	ration betw	veen buildings)			
	Distance (feet to the exposed building)	Xi	>3 stories			
	0-10	0.22	0.47			
	11-30	0.18	0.43			
	31-60	0.13	0.38			
	61-100	0.09	0.34			
	Distance, in feet, to the exposed Bldg.	40				
	Xi (from table)	0.13				
	Multiply GPM from step 4 by (1+Xi)					
	Total From Step 4	1059				
STEP 5	Approved Fire Sprinkler System? (Y or N)	N				
	Take fire flow from step 5 and multiply by spri Sprinkler credit	inkler credit	of 0.25			
	Now subtract sprinkler credit from fire flow in s	step 4				
	NEEDED FIRE FLOW	1000) GPM			

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DOC TYPE	
	APPROVED PLANS
	HISTORICAL FILE
DOC DATE	2002/11/02 YYYYMMDD

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North Carolina Department of Environment and Natural Resources

Division of Water Quality

Michael F. Easley, Governor

William G. Ross, Jr., Secretary Alan W. Klimek, P.E., Director

DIVISION OF WATER QUALITY November 2, 2004

Mr. John W. Harris John Harris and Associates, LLC P.O. Box 2187

Subject:

Permit No. SW7040601 Fox Knoll Commerce Park, Phase Two modification High Density Stormwater Project Currituck County

Dear Mr. Harris:

The Washington Regional Office received a Stormwater Application for the subject project on June 7, 2004. Staff review of the plans and specifications has determined that the project, as proposed, will comply with the Stormwater Regulations set forth in Title 15A NCAC 2H.1000. We are forwarding Permit No. SW7040601 dated November 2, 2004 to John Harris and Associates, LLC for the modification of a wet detention pond to serve Fox Knoll Commerce Park, Phase Two located in Currituck County, NC. This permit replaces permit SW7000905 issued January 17, 2001.

This permit shall be effective from the date of issuance until November 2, 2014 and shall be subject to the conditions and limitations as specified therein. Please pay special attention to Section II condition 8. which requires submittal of an amended Declaration of Protective Covenants. Also pay special attention to the Operation and Maintenance requirements in this permit. Failure to establish an adequate system for operation and maintenance of the stormwater management system will result in future compliance problems.

If any parts, requirements, or limitations contained in this permit are unacceptable, you have the right to request an adjudicatory hearing upon written request within thirty (30) days following receipt of this permit. This request must be in the form of a written petition, conforming to Chapter 150B of the North Carolina General Statutes, and filed with the Office of Administrative Hearings, Pare 2 Mr. John Harris November 2, 2004

If you have any questions, or need additional information concerning this matter, please contact me at (252) 948-3923.

Sincerely,

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Roger K. Thorpe Environmental Engineer Washington Regional Office

 cc: Performance Engineering Hyman & Robey
 Daniel Khoury, PO Box 2, Kitty Hawk, NC 27949
 Currituck County Inspections
 Washington Regional Office
 Central Files

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State Stormwater Management Systems <u>Permit No. SW7040601</u>

STATE OF NORTH CAROLINA DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES DIVISION OF WATER QUALITY

STATE STORMWATER MANAGEMENT PERMIT

HIGH DENSITY DEVELOPMENT

In accordance with the provisions of Article 21 of Chapter 143, General Statutes of North Carolina as amended, and other applicable Laws, Rules, and Regulations

PERMISSION IS HEREBY GRANTED TO

John Harris and Associates, LLC

Currituck County

FOR THE

Construction, operation and maintenance of stormwater management systems in compliance with the provisions of 15A NCAC 2H.1000 (hereafter referred to as the "stormwater rules") and the approved stormwater management plans and specifications and other supporting data as attached and on file with and approved by the Division of Water Quality and considered a part of this permit for grassed swales and a wet detention pond to serve Fox Knoll Commerce Park, Phase Two located off US Highway 158 in Currituck, NC.

This permit replaces permit SW7000905 issued January 17, 2001. This permit shall be effective upon the date of issuance until November 2, 2014 and shall be subject to the following specified conditions and limitations:

I. DESIGN STANDARDS

1. This permit is effective only with respect to the nature and volume of stormwater described in the application and other supporting data.

DIVISION OF WATER QUALITY PROJECT DATA

Project Name:

Permit Number:

Location:

Applicant:

Fox Knoll Commerce Park Phase Two

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SW7040601

Currituck County

John Harris and Associates, LLC

Mailing Address:	P.O. Box 2187 Kitty Hawk, NC 27949
Application Date:	6/7/2004 (original)
Receiving Stream:	UT to North River
Classification of Water Body:	C
Total Site Area:	25.12 ac
Total Impervious:	8.17 ac
Wet Pond Depth:	6.96 ft
Required Storage Volume:	31,231 cf
Provided Storage Volume:	32,527 cf
Required Surface Area:	18,602 sf

Provided Surface Area:

72,436 sf

Controlling Orifice:

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2 inch @ elevation 5.46 ft

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- d. Immediate repair of eroded areas
- e. Maintenance of side slopes in accordance with approved plans and specifications
- f. Debris removal and unclogging of outlet structure, orifice device and catch basins and piping.
- 4. Records of maintenance activities must be kept and made available upon request to authorized personnel of DWQ. The records will indicate the date, activity, name of person performing the work and what actions were taken.
- 5. This permit shall become voidable unless the facilities are constructed in accordance with the conditions of this permit, the approved plans and specifications, and other supporting

data.

- 6. On or before April 30, 2005 a certification must be received from an appropriate designer for the system installed certifying that the permitted facility has been installed in accordance with this permit, the approved plans and specifications, and other supporting documentation. Mail the Certification to the Washington Regional Office, 943 Washington Square Mall, Washington, North Carolina, 27889, attention Division of Water Quality.
 - 7. A copy of the approved plans and specifications shall be maintained on file by the Permittee for a minimum of five years from the date of the completion of construction

8. On or before March 31, 2005 submit an amended Declaration of Protective Covenants to correct an inaccurate reference in Section 8.03 Enforcement. The current Enforcement section indicates that the State is the beneficiary of Section 5.05 (Exterior Maintenance) when it should reference Section 4.03 (North Carolina Department on Environment and Natural Resourses Water Quality Stormwater Regulations).

III. GENERAL CONDITIONS

1. This permit is not transferable. In the event there is a desire for the facilities to change ownership, or there is a name change of the Permittee, a formal permit request must be submitted to the Division of Water Quality accompanied by an application fee, documentation from the parties involved, and other supporting materials as may be

- 4. No homeowner/lot owner/developer shall be allowed to fill in, alter, or pipe any vegetative practices (such as swales) shown on the approved plans as part of the stormwater management system without submitting a revision to the permit and receiving approval from the Division.
- 5. The following items will require a modification to the permit:
 - a. Any revision to the approved plans, regardless of size
 - b. Project name change
 - c. Transfer of ownership
 - d. Redesign or addition to the approved amount of built-upon area
 - e. Further subdivision of the project area.

In addition, the Director may determine that other revisions to the project should require a modification to the permit.

6. The Director may notify the permittee when the permitted site does not meet one or more of the minimum requirements of the permit. Within the time frame specified in the notice, the permittee shall submit a written time schedule to the Director for modifying the site to meet minimum requirements. The permittee shall provide copies of revised plans and certification in writing to the Director that the changes have been made.

II. SCHEDULE OF COMPLIANCE

- 1. The permittee will comply with the following schedule for construction and maintenance of the stormwater management system.
 - a. The stormwater management system shall be constructed in its entirety, vegetated and operational for its intended use prior to the construction of any built-upon surfaces except roads.
 - b. During construction, erosion shall be kept to a minimum and any eroded areas of the system will be repaired immediately.
- 2. The facilities must be properly maintained and operated at all times. The approved

Operation and Maintenance Plan must be followed in its entirety and maintenance must occur at the scheduled intervals.

3. The permittee shall at all times provide the operation and maintenance necessary to assure

- 3. The issuance of this permit does not preclude the Permittee from complying with any and all statutes, rules, regulations, or ordinances which may be imposed by other government agencies (local, state, and federal) which have jurisdiction.
- 4. In the event that the facilities fail to perform satisfactorily, including the creation of nuisance conditions, the Permittee shall take immediate corrective action, including those as may be required by this Division, such as the construction of additional or replacement stormwater management systems.
- 5. The permit may be modified, revoked and reissued or terminated for cause. The filing of a request for a permit modification, revocation and reissuance or termination does not stay any permit condition.

Permit issued this the 2 nd day of November, 2004.

NORTH CAROLINA ENVIRONMENTAL MANAGEMENT COMMISSION

Alan W. Klimek, P.E. Director

Alan W. Klimek, P.E. Director
 Division of Water Quality
 By Authority of the Environmental Management Commission

Permit Number SW7040601

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Fox Knoll Commerce Park, Phase Two Stormwater Permit No. SW7040601

Designer's Certification

I, _____, as a duly

registered Professional Engineer in the State of North Carolina, having been authorized to observe (periodically/weekly/full time)

the construction of the project, _____

(Project)

for ______ (Project Owner).

hereby state that to the best of my abilities, due care and diligence was used in the observation of the

project construction such that the construction was observed to be built within substantial compliance and intent of the approved plans and specifications.

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Fox Knoll Commerce Park, Phase Two Stormwater Permit No. SW7040601

Designer's Certification

I, Robert J. Stawart Jr., as a duly

registered Professional Engineer in the State of North Carolina, having been authorized to observe (periodically/weekly/full-time)

the construction of the project, <u>Fox Knoll Commerce Park</u> Phase Two-modifications to wet detention pond (Project) for John Harris and Associates, L.L.C. (Project Owner)

hereby state that to the best of my abilities, due care and diligence was used in the observation of the project construction such that the construction was observed to be built within substantial compliance and intent of the approved plans and specifications.

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N'XY CARO

	OFFICE USE ONLY	
Date Received	Fee Paid	Permit Number
12-27	\$\$ 420	5 ~ 7 000 905

State of North Carolina **Department of Environment and Natural Resources Division of Water Quality**

STORMWATER MANAGEMENT PERMIT APPLICATION FORM

This form may be photocopied for use as an original

I. **GENERAL INFORMATION**

- Applicants name (specify the name of the corporation, individual, etc. who owns the project): 1. JOHN HARRIS AND ASSOCIATES, LLC
- 2. Print Owner/Signing Official's name and title (person legally responsible for facility and compliance): JOHN W. HARRIS, MGR.
- Mailing Address for person listed in item 2 above: 3.

P.O. BOX 2187		
City: KITTY HAINK	State: <u>NC</u> Zip:_ <u>7</u>]	949 -
Telephone Number: (252) 26	17243	

4. Project Name (subdivision, facility, or establishment name - should be consistent with project name on plans, specifications, letters, operation and maintenance agreements, etc.):

FOX KNOLL COMMERCE PARK, PHASE TWO

- 5. Location of Project (street address): US HINY ISS (CARATOKE HWY) City: POINELL'S POINT County: CURRITUCK
- Directions to project (from nearest major intersection): 6. PROJECT TRACT IS G MILES NORTH OF THE WRIGHT MEMORIAL BRIDGE ON THE EAST SIDE OF U.S. HWY. 158

- 7. Latitude: N 36' 08' 47'' Longitude: W 75' 50' 41''of project
- Contact person who can answer questions about the project: 8.

Name: ROBERT STEINART Telephone Number: (752)4918354 4

- 2. If this application is being submitted as the result of a renewal or modification to an existing permit, list the existing permit number $\underline{N/A}$ and its issue date (if known) $\underline{N/A}$
- 3. Specify the type of project (check one):

 _____Low Density
 _____Redevelop

 _____General Permit
 ____Other
- Additional Project Requirements (check applicable blanks):
 ____CAMA Major ____Sedimentation/Erosion Control ____404/401 Permit ____NPDES Stormwater

Information on required state permits can be obtained by contacting the Customer Service Center at 1-877-623-6748.

III. PROJECT INFORMATION

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 In the space provided below, summarize how stormwater will be treated. Also attach a detailed narrative (one to two pages) describing stormwater management for the project.

STORMWATER WILL BE CONVEYED THROUGH GRASSED ROADSIDE SWARES AND CULVERTS

TO AN APPROVED WET DETENTION BASIN

- 2. Stormwater runoff from this project drains to the <u>PASQUOTANK</u> River basin.
- 3. Total Project Area: <u>25-1185</u> acres 4. Project Built Upon Area: <u>46</u>% (PHASE TWO ONLY)
- 5. How many drainage areas does the project have? 2
- 6. Complete the following information for each drainage area. If there are more than two drainage areas in the project, attach an additional sheet with the information for each area provided in the same format as below.

Basin Information	Drainage Area 1 Drainage Area 2
Receiving Stream Name	U.T. TO CURRITUCK SOUND
Receiving Stream Class	5.(.
Drainage Area	1094163 SF (25,1185 AC)
Existing Impervious [*] Area	NONE
Proposed Impervious [*] Area	440,499 SF
% Impervious [*] Area (total)	467.

Impervious^{*} Surface Area

Interview Schrace / Med		$O_{m,m}$
On-site Buildings (SEE HOTE)	387089 SF	
On-site Streets	32 148 SF	
On-site Parking		
		-

- 2. If this application is being submitted as the result of a renewal or modification to an existing permit, list the existing permit number $\frac{N/A}{A}$ and its issue date (if known) N/A
- Specify the type of project (check one):
 Low Density _____High Density _____Redevelop _____General Permit _____Other
- Additional Project Requirements (check applicable blanks):
 ____CAMA Major ____Sedimentation/Erosion Control ____404/401 Permit ____NPDES Stormwater

Information on required state permits can be obtained by contacting the Customer Service Center at 1-877-623-6748.

III. PROJECT INFORMATION

 In the space provided below, summarize how stormwater will be treated. Also attach a detailed narrative (one to two pages) describing stormwater management for the project.

STORMWATER WILL BE CONVEYED THROUGH GRASSED ROADSIDE SWALES AND CULVERTS

TO AN APPROVED WET DETENTION BASIN

- 2. Stormwater runoff from this project drains to the <u>PASOUOTANK</u> River basin.
- 3. Total Project Area: <u>25-1185</u> acres 4. Project Built Upon Area: <u>40</u>% (PHASE TWO ONLY)
- 5. How many drainage areas does the project have? 2
- 6. Complete the following information for each drainage area. If there are more than two drainage areas in the project, attach an additional sheet with the information for each area provided in the same format as below.

Basin Information	Drainage Area 1	Drainage Area 2
Receiving Stream Name	U.T. TO CURRITUCK SOUND	
Receiving Stream Class	5.6.	
Drainage Area	1.094 163 SF (25.1185 AC)	
Existing Impervious [*] Area	NONE	
Proposed Impervious [*] Area	440,499 SF	
% Impervious* Area (total)	40%	

Impervious Surface Area	Drainage Area 1	Drainagé Area 2
On-site Buildings (SEE HOTE)	387089 SF	
On-site Streets	32.148 SF	
On-cito Parking		

- . 2
- 7. How was the off-site impervious area listed above derived? FROM AUTOLAD RIA AREA

CALCULATION ROUTINE

IV. DEED RESTRICTIONS AND PROTECTIVE COVENANTS

The following italicized deed restrictions and protective covenants are required to be recorded for all subdivisions, outparcels and future development prior to the sale of any lot. If lot sizes vary significantly, a table listing each lot number, size and the allowable built-upon area for each lot must be provided as an attachment.

- The following covenants are intended to ensure ongoing compliance with state stormwater management permit number ________as issued by the Division of Water Quality. These covenants may not be changed or deleted without the consent of the State.
- No more than <u>GO7</u>: square feet of any lot shall be covered by structures or impervious materials. Impervious materials include asphalt, gravel, concrete, brick, stone, slate or similar material but do not include wood decking or the water surface of swimming pools.
- 3. Swales shall not be filled in, piped, or altered except as necessary to provide driveway crossings.
- 4. Built-upon area in excess of the permitted amount requires a state stormwater management permit modification prior to construction.
- 5. All permitted runoff from outparcels or future development shall be directed into the permitted stormwater control system. These connections to the stormwater control system shall be performed in a manner that maintains the integrity and performance of the system as permitted.

By your signature below, you certify that the recorded deed restrictions and protective covenants for this project shall include all the applicable items required above, that the covenants will be binding on all parties and persons claiming under them, that they will run with the land, that the required covenants cannot be changed or deleted without concurrence from the State, and that they will be recorded prior to the sale of any lot.

V. SUPPLEMENT FORMS

The applicable state stormwater management permit supplement form(s) listed below must be submitted for each BMP specified for this project. Contact the Stormwater and General Permits Unit at (919) 733-5083 for the status and availability of these forms.

Form SWU-102	Wet Detention Basin Supplement
Earner CHALLION	Le Citere Besie Conselere est

Form SWU-103 Form SWU-104 Form SWU-105 Form SWU-106 Form SWU-107 Infiltration Basin Supplement Low Density Supplement Curb Outlet System Supplement Off-Site System Supplement Underground Infiltration Trench Supplement

VI. SUBMITTAL REQUIREMENTS

Only complete application packages will be accepted and reviewed by the Division of Water Quality (DWQ). A complete package includes all of the items listed below. The complete application package should be submitted to the appropriate DWQ Regional Office.

- Please indicate that you have provided the following required information by initialing in the space provided next to each item.
 - Original and one copy of the Stormwater Management Permit Application Form
 - One copy of the applicable Supplement Form(s) for each BMP
 - Permit application processing fee of \$420 (payable to NCDENR)
 - Detailed narrative description of stormwater treatment/management
 - Two copies of plans and specifications, including:
 - Development/Project name
 - Engineer and firm
 - Legend
 - North arrow
 - Scale

- Revision number & date
- Mean high water line
- Dimensioned property/project boundary
- Location map with named streets or NCSR numbers
- Original contours, proposed contours, spot elevations, finished floor elevations
- Details of roads, drainage features, collection systems, and stormwater control measures
- Wetlands delineated, or a note on plans that none exist
- Existing drainage (including off-site), drainage easements, pipe sizes, runoff calculations
- Drainage areas delineated
- Vegetated buffers (where required)

VII. AGENT AUTHORIZATION

If you wish to designate authority to another individual or firm so that they may provide information on your behalf, please complete this section.

VIII. APPLICANT'S CERTIFICATION

I, (print or type name of person listed in General Information, item 2) <u>TOHN</u> <u>NA. HARRIS</u>, certify that the information included on this permit application form is, to the best of my knowledge, correct and that the project will be constructed in conformance with the approved plans, that the required deed restrictions and protective covenants will be recorded, and that the proposed project complies with the requirements of 15A.

VI. SUBMITTAL REQUIREMENTS

Only complete application packages will be accepted and reviewed by the Division of Water Quality (DWQ). A complete package includes all of the items listed below. The complete application package should be submitted to the appropriate DWQ Regional Office.

- Please indicate that you have provided the following required information by initialing in the space provided next to each item.
 - Original and one copy of the Stormwater Management Permit Application Form
 - One copy of the applicable Supplement Form(s) for each BMP
 - Permit application processing fee of \$420 (payable to NCDENR)
 - Detailed narrative description of stormwater treatment/management
 - Two copies of plans and specifications, including:
 - Development/Project name
 - Engineer and firm
 - Legend
 - North arrow
 - Scale

- Revision number & date
- Mean high water line
- Dimensioned property/project boundary
- Location map with named streets or NCSR numbers
- Original contours, proposed contours, spot elevations, finished floor elevations
- Details of roads, drainage features, collection systems, and stormwater control measures
- Wetlands delineated, or a note on plans that none exist
- Existing drainage (including off-site), drainage easements, pipe sizes, runoff calculations
- Drainage areas delineated
- Vegetated buffers (where required)

VII. AGENT AUTHORIZATION

If you wish to designate authority to another individual or firm so that they may provide information on your behalf, please complete this section.

Designated agent (i	ndividual or firm):_	PERFORM	ANCE	ENCINEERI	NG	
Mailing Address:	8604 CAR	ATOXE HIM	N			

City: POINEUS	POINT	_ State: <u>NC</u>	Zip:27966
Phone: <u>(252</u>) 491 8354	Fax: (252) 491 5112

VIII. APPLICANT'S CERTIFICATION

I, (print or type name of person listed in General Information, item 2) <u>JOHN N. HARRIS</u> certify that the information included on this permit application form is, to the best of my knowledge, correct and that the project will be constructed in conformance with the approved plans, that the required deed restrictions

Permit No.

(to be provided by DWQ)

State of North Carolina Department of Environment and Natural Resources Division of Water Quality

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STORMWATER MANAGEMENT PERMIT APPLICATION FORM

WET DETENTION BASIN SUPPLEMENT

This form may be photocopied for use as an original

DWQ Stormwater Management Plan Review:

A complete stormwater management plan submittal includes an application form, a wet detention basin supplement for each basin, design calculations, and plans and specifications showing all basin and outlet structure details.

I. PROJECT INFORMATION

Project Name: Fox KNOLL COMMERCE PARK, PHASE TWO Contact Person: ROBERT STEWART Phone Number: (252) 4918354 For projects with multiple basins, specify which basin this worksheet applies to: BASIN # 2

elevations

Basin Bottom Elevation Permanent Pool Elevation Temporary Pool Elevation

(floor of the basin) (elevation of the orifice) (elevation of the discharge structure overflow)

areas

Permanent Pool Surface Area	<u>31,081</u>	_ sq. ft.
Drainage Area	25.1185	_ ac.
Impervious Area	10.1125	_ac.

(water surface area at the orifice elevation) (on-site and off-site drainage to the basin) (on-site and off-site drainage to the basin)

volumes

Permanent Pool Volume	108,54
Temporary Pool Volume	52,35
Forebay Volume	<u>23,98</u>

<u>543</u> cu. ft. (combined volume of main basin and forebay) <u>351</u> cu. ft. (volume detained above the permanent pool)

 $\frac{18}{22}$ cu. ft. (approximately 20% of total volume) 22%

Other parameters

Footnotes:

- When using the Division SA/DA tables, the correct SA/DA ratio for permanent pool sizing should be computed based upon the actual impervious % and permanent pool depth. Linear interpolation should be employed to determine the correct value for nonstandard table entries.
- In the 20 coastal counties, the requirement for a vegetative filter may be waived if the wet detention basin is designed to provide 90% TSS removal. The NCDENR BMP manual provides design tables for both 85% TSS removal and 90% TSS removal.

II. REQUIRED ITEMS CHECKLIST

The following checklist outlines design requirements per the Stormwater Best Management Practices Manual (N.C. Department of Environment, Health and Natural Resources, February 1999) and Administrative Code Section: 15 A NCAC 2H .1008.

Initial in the space provided to indicate the following design requirements have been met and supporting documentation is attached. If the applicant has designated an agent in the Stormwater Management Permit Application Form, the agent may initial below. If a requirement has not been met, attach justification.

Applicants Initials

- a. The permanent pool depth is between 3 and 6 feet (required minimum of 3 feet).
- b. The forebay volume is approximately equal to 20% of the basin volume.
- c. The temporary pool controls runoff from the design storm event.
- d. The temporary pool draws down in 2 to 5 days.
- e. If required, a 30-foot vegetative filter is provided at the outlet (include non-erosive flow calculations)
- The basin length to width ratio is greater than 3:1.
- g. The basin side slopes above the permanent pool are no steeper than 3:1.
- h. A submerged and vegetated perimeter shelf with a slope of 6:1 or less (show detail).
- i. Vegetative cover above the permanent pool elevation is specified.
 - A trash rack or similar device is provided for both the overflow and orifice.
- k. A recorded drainage easement is provided for each basin including access to nearest rightof-way.

45

- If the basin is used for sediment and erosion control during construction, clean out of the basin is specified prior to use as a wet detention basin.

_____ m. A mechanism is specified which will drain the basin for maintenance or an emergency.

III. WET DETENTION BASIN OPERATION AND MAINTENANCE AGREEMENT

Maintenance activities shall be performed as follows:

ł.

2

- After every significant runoff producing rainfall event and at least monthly:
 - Inspect the wet detention basin system for sediment accumulation, erosion, trash accumulation, **a**. vegetated cover, and general condition.
 - b. Check and clear the orifice of any obstructions such that drawdown of the temporary pool occurs within 2 to 5 days as designed.
- Repair eroded areas immediately, re-seed as necessary to maintain good vegetative cover, mow vegetative 2. cover to maintain a maximum height of six inches, and remove trash as needed.
- Inspect and repair the collection system (i.e. catch basins, piping, swales, riprap, etc.) quarterly to 3. maintain proper functioning.
- Remove accumulated sediment from the wet detention basin system semi-annually or when depth is 4. reduced to 75% of the original design depth (see diagram below). Removed sediment shall be disposed of in an appropriate manner and shall be handled in a manner that will not adversely impact water quality (i.e. stockpiling near a wet detention basin or stream, etc.).
 - The measuring device used to determine the sediment elevation shall be such that it will give an accurate depth reading and not readily penetrate into accumulated sediments.
 - When the permanent pool depth reads ______ feet in the main pond, the sediment shall be removed.
 - When the permanent pool depth reads ______ feet in the forebay, the sediment shall be removed.

BASIN DÍAGRAM (fill in the blanks)

FOREBAY

MAIN POND

1

7. All components of the wet detention basin system shall be maintained in good working order.

I acknowledge and agree by my signature below that I am responsible for the performance of the seven maintenance procedures listed above. I agree to notify DWQ of any problems with the system or prior to any changes to the system or responsible party.

Print name: JOHN W. HARRIS
Title: <u>OWNER</u>
Address: P.O. BOX 2187 KITTY HAINK NC 27949
Phone: 252 261 7243
Signature: for whether the second sec
Date: $1/2/2/00$

Note: The legally responsible party should not be a homeowners association unless more than 50% of the lots have been sold and a resident of the subdivision has been named the president.

SEAL

My commission expires 10-8-2005

DEFENNER

the second se	OFFICE USE ONLY	
Date Received	Fee Paid	Permit Number
JUN 7 2004	\$420	5W7040601

DWQ-WARO State öf North Carolina Department of Environment and Natural Resources Division of Water Quality

STORMWATER MANAGEMENT PERMIT APPLICATION FORM

This form may be photocopied for use as an original

I. GENERAL INFORMATION

. 5

- 1. Applicants name (specify the name of the corporation, individual, etc. who owns the project): For Knoll, Froperty_Owners_Association, Ioc
- 2. Print Owner/Signing Official's name and title (person legally responsible for facility and compliance):

John W. Harris, President

3. Mailing Address for person listed in item 2 above:

P.O. Box 2187 City: Kitty Hawk Zip: 27949 State: NC Telephone Number: (252) 261724-3

 Project Name (subdivision, facility, or establishment name - should be consistent with project name on plans, specifications, letters, operation and maintenance agreements, etc.):

5. Location of Project (street address):

6. Directions to project (from nearest major intersection):

- \therefore Lander $N \rightarrow OV + I$ congrude: $N \rightarrow OV + I$ or project
- 8. Contact person who can answer questions about the project:

Name: Robert Stewart ____ Telephone Number: (252) 4918354

2. If this application is being submitted as the result of a renewal or modification to an existing permit, list the existing permit number SW 7000905 and its issue date (if 表前の 13017, 2001

e;

- Specify the type of project (check one):
 Low Density _____High Density _____Redevelop _____General Permit _____Other
- 4. Additional Project Requirements (check applicable blanks):

____CAMA Major ____Sedimentation/Erosion Control ____404/401 Permit ____NPDES Stormwater

Information on required state permits can be obtained by contacting the Customer Service Center at 1-877-623-6748.

III. PROJECT INFORMATION

 In the space provided below, summarize how stormwater will be treated. Also attach a detailed narrative (one to two pages) describing stormwater management for the project.

Stormwater will be conveyed via roadside, grassed swales to a wet detention

basin for treatment

- 2. Stormwater runoff from this project drains to the Pasquatan K River basin: -
- 3. Total Project Area: <u>21.1185</u> acres 4. Project Built Upon Area: <u>33</u>%
- 5. How many drainage areas does the project have? OUE ORAINHLE AREA FOR PHASE 2
- 6. Complete the following information for each drainage area. If there are more than two drainage areas in the project, attach an additional sheet with the information for each area provided in the same format as below.

Basin Information	Drainage Area 1 Drainage Area 2
Receiving Stream Name	U.T. TO CURRITUSK SOUND
Receiving Stream Class	5 C
Drainage Area	1094 163 SF (25.1185 AC)
Existing Impervious [*] Area	53,4105F
Proposed Impervious*Area	302 380 SF
% Impervious [*] Area (total)	355.190 SF (32.5%)

Impervious^{*} Surface Area

On-site Buildings	323642SF	
On-site Streets	32,148 SE	
On-site Parking		
On-site Sidewalks		

How was the off-site impervious area listed above derived? AUTOCAD AREA CHLULITION ROUTINE AND 7. MINNER CALCULATION OF 60% X LOT AREAS

IV. DEED RESTRICTIONS AND PROTECTIVE COVENANTS

The following italicized deed restrictions and protective covenants are required to be recorded for all subdivisions, outparcels and future development prior to the sale of any lot. If lot sizes vary significantly, a table listing each lot number, size and the allowable built-upon area for each lot must be provided as an attachment.

- The following covenants are intended to ensure ongoing compliance with state stormwater management permit number ______as issued by the Division of Water Quality. These covenants may not be changed or deleted without the consent of the State.
- No more than $\frac{60\%}{60\%}$ square feet of any lot shall be covered by structures or impervious materials. 2. Impervious materials include asphalt, gravel, concrete, brick, stone, slate or similar material but do not include wood decking or the water surface of swimming pools.
- Swales shall not be filled in, piped, or altered except as necessary to provide driveway crossings. 3.
- 4. Built-upon area in excess of the permitted amount requires a state stormwater management permit modification prior to construction.
- All permitted runoff from outparcels or future development shall be directed into the permitted stormwater control 5. system. These connections to the stormwater control system shall be performed in a manner that maintains the integrity and performance of the system as permitted.

By your signature below, you certify that the recorded deed restrictions and protective covenants for this project shall include all the applicable items required above, that the covenants will be binding on all parties and persons claiming under them, that they will run with the land, that the required covenants cannot be changed or deleted without concurrence from the State, and that they will be recorded prior to the sale of any lot.

SUPPLEMENT FORMS V.

The applicable state stormwater management permit supplement form(s) listed below must be submitted for each BMP specified for this project. Contact the Stormwater and General Permits Unit at (919) 733-5083 for the status and availability of these forms.

Wet Detention Basin Supplement Form SWU-102 Infiltration Basin Supplement Form SWU-103 Low Density Supplement Curb Outlet System Supplement Off-Site System Supplement Underground Infiltration Trench Supplement Marian Desta Containant P CIA7T T 400

Form SWU-104 Form SWU-105 Form SWU-106 Form SWU-107

VI. SUBMITTAL REQUIREMENTS

Only complete application packages will be accepted and reviewed by the Division of Water Quality (DWQ). A complete package includes all of the items listed below. The complete application package should be submitted to the appropriate DWQ Regional Office.

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- 1. Please indicate that you have provided the following required information by initialing in the space provided next to each item.
 - Original and one copy of the Stormwater Management Permit Application Form
 - One copy of the applicable Supplement Form(s) for each BMP
 - Permit application processing fee of \$420 (payable to NCDENR)
 - Detailed narrative description of stormwater treatment/management
 - Two copies of plans and specifications, including:
 - Development/Project name
 - Engineer and firm
 - Legend
 - North arrow
 - Scale

- Revision number & date
- N/I Mean high water line
 - Dimensioned property/project boundary
 - Location map with named streets or NCSR numbers
 - Original contours, proposed contours, spot elevations, finished floor elevations
 - Details of roads, drainage features, collection systems, and stormwater control measures
 - Wetlands delineated, or a note on plans that none exist
 - Existing drainage (including off-site), drainage easements, pipe sizes, runoff calculations
 - Drainage areas delineated
 - Vegetated buffers (where required)

VII. AGENT AUTHORIZATION

If you wish to designate authority to another individual or firm so that they may provide information on your behalf, please complete this section.

Designated agent (individual or firm): ferformance	Engineer	ing '
Mailing Address: 8604 CaratoKe Hwy.	J	
City: Powells Point	_ State:_ <u>NC.</u>	Zip: <u>27966</u>
Phone: (252) 4918354	Fax: <u>(752</u>) 49/5/12

VIII. APPLICANT'S CERTIFICATION

I, (print or type name of person listed in General Information, item 2) <u>John W. Harris</u>, certify that the information included on this permit application form is, to the best of my knowledge, correct and that the project will be constructed in conformance with the approved plans, that the required deed restrictions and protective covenants will be recorded, and that the proposed project complies with the requirements of 15A

Permit No. _____

(to be provided by DWQ)

7 2004

JUN

State of North Carolina Department of Environment and Natural Resources **Division of Water Quality**

STORMWATER MANAGEMENT PERMIT APPLICATION FORM

WET DETENTION BASIN SUPPLEMENT

This form may be photocopied for use as an original

<u>DWO Stormwater Management Plan Review:</u>

DWO-WARO · A complete stormwater management plan submittal includes an application form, a wet detention basin supplement for each basin, design calculations, and plans and specifications showing all basin and outlet structure details.

PROJECT INFORMATION

Project Name: Fox Knell Commerce Park, Phase Two Contact Person: Robert J. Stewart, Jr. Phone Number: (252) 491 8354 For projects with multiple basins, specify which basin this worksheet applies to: _____

ft.

ft.

elevations

Basin Bottom Elevation	- 1.5
Permanent Pool Elevation	5.46
Temporary Pool Elevation	5.9

(floor of the basin) AS ORIGINALLY DESIGNED (elevation of the orifice) (elevation of the discharge structure overflow)

areas

Permanent Pool Surface.	Area <u>72,436</u>	_sq. ft.
Drainage Area	25.1185	_ ac.
Impervious Area	<u>8.1678</u>	_ ac.

(water surface area at the orifice elevation	<i>э</i> п)
(on-site and off-site drainage to the basir	1)
(on-site and off-site drainage to the basir	1)

volumes 392,786 <u>392,786</u> cu. ft. (combined volume of main basin and forebay) Permanent Pool Volume 527 cu. ft. (volume detained above the permanent pool) 32 Temporary Pool Volume

Forebay Volume _{42,935}	<u>42,935</u> cu. ft.	(approximately 20% of total volume)		
Other parameters	11			

Footnotes:

- When using the Division SA/DA tables, the correct SA/DA ratio for permanent pool sizing should be computed based upon the actual impervious % and permanent pool depth. Linear interpolation should be employed to determine the correct value for nonstandard table entries.
- In the 20 coastal counties, the requirement for a vegetative filter may be waived if the wet detention basin is designed to provide 90% TSS removal. The NCDENR BMP manual provides design tables for both 85% TSS removal and 90% TSS removal.

II. REQUIRED ITEMS CHECKLIST

THAS & MUL

The following checklist outlines design requirements per the Stormwater Best Management Practices Manual (N.C. Department of Environment, Health and Natural Resources, February 1999) and Administrative Code Section: 15 A NCAC 2H .1008.

Initial in the space provided to indicate the following design requirements have been met and supporting documentation is attached. If the applicant has designated an agent in the Stormwater Management Permit Application Form, the agent may initial below. If a requirement has not been met, attach justification.

Applicants Initials

11 % =

KJS.

RJS

<u>KIA</u>

RJS

RIS

RTS

RJS

- a. The permanent pool depth is between 3 and 6 feet (required minimum of 3 feet). 7 ff. deep
 - b. The forebay volume is approximately equal to 20% of the basin volume.
 - c. The temporary pool controls runoff from the design storm event.
 - d. The temporary pool draws down in 2 to 5 days.
 - _____e. If required, a 30-foot vegetative filter is provided at the outlet (include non-erosive flow) calculations)
- f. The basin length to width ratio is greater than 3:1. RJS
 - g. The basin side slopes above the permanent pool are no steeper than 3:1.
 - h. A submerged and vegetated perimeter shelf with a slope of 6:1 or less (show detail).
 - i. Vegetative cover above the permanent pool elevation is specified.
 - j. A trash rack or similar device is provided for both the overflow and orifice.
 - k. A recorded drainage easement is provided for each basin including access to nearest rightof-way.
 - 1. If the basin is used for sediment and erosion control during construction, clean out of the basin is specified prior to use as a wet detention basin.
 - m. A mechanism is specified which will drain the basin for maintenance or an emergency.

N/A

III. WET DETENTION BASIN OPERATION AND MAINTENANCE AGREEMENT

Maintenance activities shall be performed as follows:

- After every significant runoff producing rainfall event and at least monthly:
 - Inspect the wet detention basin system for sediment accumulation, erosion, trash accumulation, a. vegetated cover, and general condition.
 - b. Check and clear the orifice of any obstructions such that drawdown of the temporary pool occurs within 2 to 5 days as designed.
- Repair croded areas immediately, re-seed as necessary to maintain good vegetative cover, mow vegetative 2. cover to maintain a maximum height of six inches, and remove trash as needed.
- Inspect and repair the collection system (i.e. catch basins, piping, swales, riprap, etc.) quarterly to 3. maintain proper functioning.

Remove accumulated sediment from the wet detention basin system semi-annually or when depth is 4. reduced to 75% of the original design depth (see diagram below). Removed sediment shall be disposed of in an appropriate manner and shall be handled in a manner that will not adversely impact water quality (i.e. stockpiling near a wet detention basin or stream, etc.).

The measuring device used to determine the sediment elevation shall be such that it will give an accurate depth reading and not readily penetrate into accumulated sediments.

When the permanent pool depth reads ______ feet in the main pond, the sediment shall be removed.

When the permanent pool depth reads ______ feet in the forebay, the sediment shall be removed.

BASIN DIAGRAM

(fill in the blanks)

MAIN POND

7. All components of the wet detention basin system shall be maintained in good working order.

I acknowledge and agree by my signature below that I am responsible for the performance of the seven maintenance procedures listed above. I agree to notify DWQ of any problems with the system or prior to any changes to the system or responsible party.

Print name: TOHN W. HARRIS	
Title: President.	
Address: P.O. Box 2187 KITTY HAWK, NC 27949	
Phone: $-\frac{1}{6752}$ <u>2617243</u>	
Signature: 104 - 1	 -
Date:	' .

Note: The legally responsible party should not be a homeowners-association unless more than 50% of the lots have been sold and a resident of the subdivision has been named the president.

SEAL

My commission expires_____