

STORMWATER FORM

Legal Business Name: _____
Facility Name: _____

Please include:

- Site plan with application (Show utilities, grading, drainage map, outdoor process and storage areas.)

Stormwater Management

1. Does your site receive stormwater from offsite properties?
 Yes No
2. Where does your stormwater go? (Check all that apply)
 Surface drainage (swale, sheet flow, creek, river, lake, wetland)
 Sewers:
 Storm Combined
 Sanitary – volume Unsure
 Infiltrates into ground
 Evaporates
 Reused on-site
Describe use: _____
Is stormwater discharged to MSD? Yes No
 Not sure
 Other (Describe) _____
3. Is stormwater detained/retained on site? Yes No If Yes:
a. What is the area (square feet) of the property? _____
b. What is the total Detention/Retention volume (cubic feet)? _____
c. What is the maximum release rate (gpm): _____
4. What square footage of the site has the capacity to contaminate stormwater? _____
a. List all materials stored outside: _____

- b. List all outdoor processes: _____

5. Is stormwater treated onsite? Yes No
a. What substances are you trying to control? _____
b. How is stormwater treated? _____

- c. Are any byproducts created? Yes No
d. How are byproducts disposed? _____
6. Does your facility have any Stormwater Permits? Yes No
If yes, list: _____
7. Is stormwater analyzed by a laboratory? Yes No
If yes, attach copy of most recent lab results.
8. Check responsible party for stormwater management at your facility (Name, address, phone)
 Applicant Property Owner Local Jurisdiction Other: _____
Name: _____
Address: _____
Phone: _____

Certification

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations."

Signature of Duly Authorized Representative

Printed Name

Date