



Exhibit A

Permit No: _____

Portage Utility Service

Drainage and Stormwater Management Permit Application

(Stormwater Designs and SWPP plans should comply with the City of Portage [Stormwater Technical Guide](#))

Land Alteration / Project Name: _____

Location of Project: _____

Owner Information:

Name: _____ Contact: _____

Address: _____ Phone: _____

Fax: _____ Email: _____

Developer Information (If not Owner):

Name: _____ Contact: _____

Address: _____ Phone: _____

Fax: _____ Email: _____

Engineer Information:

Name: _____ Contact: _____

Address: _____ Phone: _____

Fax: _____ Email: _____

Contractor Information:

Name: _____ Contact: _____

Address: _____ Phone: _____

Fax: _____ Email: _____

Submitted By: _____ Date: _____



**Portage Utility Service
Drainage and Stormwater Management Permit Application Checklist**

General Requirements

	Submitted (Initials)	Reviewed (Initials)
Sealed Plans and Computations	_____	_____
Bound Report with Index and Page Numbering	_____	_____
Appropriate Scale	_____	_____
North Arrow	_____	_____
Existing Contours:		
1-foot contours for slopes less than 10%	_____	_____
2-foot contours for slopes greater than 10% and less than 20%	_____	_____
5-foot contours for slopes greater than 20 %	_____	_____
 Benchmark:		
NGVD 29	_____	_____
NGVD 88	_____	_____
Assumed for areas less than 3 acres	_____	_____
Location Map	_____	_____
Vicinity Map	_____	_____

Existing and Proposed Drainage Facilities

	Submitted (Initials)	Reviewed (Initials)
Location of the drainage and storm water management facility by planimetric distances, referenced from traverse lines, USGS section lines, property markers or road centerlines. In areas where such physical features are unavailable, the State of Indiana coordinate system or other acceptable horizontal and vertical datum may be used.	_____	_____
Direction of Flow	_____	_____
Elevations of storm drain and BMP inverts	_____	_____
Gradient of storm drains and BMPs	_____	_____
Size of storm drain and BMPs	_____	_____
Capacity of storm drain and BMPs	_____	_____
A sequence describing when each post construction stormwater Quality treatment BMP will be installed	_____	_____
Overland Flow Route(s)	_____	_____
Impacted Drainage areas and SFHAs	_____	_____
Locations of Buffer Zones	_____	_____



Exhibit B

**Portage Utility Service
Drainage and Stormwater Management Permit Application Checklist Cont.**

Plan and Profile Sheet(s)	Submitted (Initials)	Reviewed (Initials)
Scale: 1' = 50' (horizontal), 1" = 5' (vertical)	_____	_____
Appropriate right-of-way and easement limits	_____	_____
sufficient information downstream, to show effect of the drainage and storm water management facility on outfall channel	_____	_____
Centerline grade of road for existing or proposed storm drains located in a pavement or shoulder area	_____	_____
Existing grade above existing or proposed storm drain located outside of pavement or shoulder areas	_____	_____
Profile of undisturbed earth for storm drains and BMPs constructed on fill	_____	_____
An Erosion Control Plan (ECP) pursuant to 327 IAC 15-5 which includes but is not limited to treatment controls, temporary and permanent seeding schedule, construction schedule, and maintenance schedule.	_____	_____
 Design Calculations	 Submitted (Initials)	 Reviewed (Initials)
Natural Resources Assessment:		
Maps identifying significant natural features and resources such as undisturbed forest areas, stream buffers and steep slopes that should be preserved to retain some of the original hydrologic function of the site	_____	_____
A site layout and narrative indicating the conservation and preservation of significant natural feature	_____	_____
 Estimation of storm water runoff:		
Drainage area map with an appropriate scale and base or the 100-year floodplain where applicable	_____	_____
Weighted runoff coefficient and/or curve number computations	_____	_____
Time Concentration (Tc) computations	_____	_____



Exhibit B

**Portage Utility Service
Drainage and Stormwater Management Permit Application Checklist Cont.**

Design Calculations Cont.	Submitted (Initials)	Reviewed (Initials)
Closed conduit and open channel design computations:		
Size of pipe or channel cross-section	_____	_____
Pipe or channel invert	_____	_____
Roughness coefficients	_____	_____
Flow velocities (in feet per second)	_____	_____
Design capacities (in cubic feet per second)	_____	_____
Energy dissipation computations	_____	_____

BMP Operation and Maintenance Manual	Submitted (Initials)	Reviewed (Initials)
BMP owner name, address, business phone number, email address, and cellular phone number	_____	_____
Site drawings (8 ½" by 11"), showing both plan and cross section views, showing the BMP and applicable features, including dimensions, maintenance easements, outlet works, forebays, signage, connecting structures, wiers, invert elevations, etc.	_____	_____
Guidance on owner required routine inspections	_____	_____
Requirement of owner to perform maintenance	_____	_____
Guidance on routine maintenance, including mowing, litter removal, woody growth removal, signage, etc.	_____	_____
Guidance on remedial maintenance; such as inlet replacement, outlet, works	_____	_____
Guidance on sediment removal, both narrative and graphical, describing when sediment removal should occur to insure that the BMP remains effective as a water quality control device	_____	_____
A statement that the City's representative has the right to enter the property to inspect or in an emergency and, at the owners cost, maintain the BMP	_____	_____
A tabular schedule showing inspection and maintenance requirements	_____	_____
Identification of the property / BMP owner as the party responsible for maintenance, including cost	_____	_____



Exhibit C

**Portage Utility Service
Drainage and Stormwater Management Permit
Certificate of Completion and Compliance**

Land Alternation / Project Name: _____

Permit No: _____

Date Permit Issued: _____

Engineer / Surveyor Information:

Name: _____

Contact: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

I hereby certify that:

1. I am an Indiana Registered Professional Engineer / Land Surveyor;

2. I am familiar with the requirements applicable to such land alteration and City of Portage Ordinance

NO: _____;

3. I have personally observed the land alteration accomplished pursuant to the above referenced Drainage and Stormwater Management Permit; and

4. To the best of my knowledge, information and belief such land alteration has been performed and completed in conformity with all permit requirements, with the exception of:

Submitted By: _____

Date: _____

Approved by _____

Date: _____

Portage Utilities Engineer