



Public Services  
 Engineering  
 212 Operations Center Dr  
 Wilmington, NC 28412  
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**STORMWATER MANAGEMENT PERMIT APPLICATION FORM**  
 (Form SWP 2.3)

**I. GENERAL INFORMATION**

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

\_\_\_\_\_

2. Location of Project (street address):

\_\_\_\_\_

City: Wilmington County: New Hanover Zip: \_\_\_\_\_

**II. PERMIT INFORMATION**

1. Specify the type of project (check one):      Low Density      High Density  
    Offsite Stormwater System      Drainage Plan      Redevelopment      Other

If the project drains to an Offsite System, list the Stormwater Permit Number(s):

City of Wilmington: \_\_\_\_\_ State – NCDEQ/DEMLR: \_\_\_\_\_

2. Is the project currently covered (whole or in part) by an existing City or State (NCDEQ/DEMLR) Stormwater Permit?    Yes    No

If yes, list all applicable Stormwater Permit Numbers:

City of Wilmington: \_\_\_\_\_ State – NCDEQ/DEMLR: \_\_\_\_\_

3. Additional Project Permit Requirements (check all applicable):

CAMA Major      Sedimentation/Erosion Control      404/401 Permit

**III. CONTACT INFORMATION**

1. Print Applicant / Signing Official's name and title (the developer, property owner, lessee, designated government official, individual, etc. who owns the project):

Applicant / Organization: \_\_\_\_\_

Signing Official & Title: \_\_\_\_\_

a. Contact information for Applicant / Signing Official:

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

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

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

b. Please check the appropriate box. The applicant listed above is:

The property owner/Purchaser (Skip to item 3)

Lessee (Attach a copy of the lease agreement and complete items 2 and 2a below)

Developer (Complete items 2 and 2a below.)

2. Print Property Owner's name and title (if different from the applicant).

Property Owner / Organization: \_\_\_\_\_

Signing Official & Title: \_\_\_\_\_

a. Contact information for Property Owner:

Street Address: \_\_\_\_\_

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

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

3. (Optional) Other Contact name and title (such as a construction supervisor) who would like to be copied on all correspondence:

Other Contact Person / Organization: \_\_\_\_\_

Signing Official & Title: \_\_\_\_\_

a. Contact information for person listed in item 3 above:

Street Address: \_\_\_\_\_

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

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

4. Agent Authorization: Complete this section if you wish to designate authority to another individual and/or firm (such as a consulting engineer and /or firm) so that they may provide information on your behalf for this project (such as addressing requests for additional information).

Consulting Engineer: \_\_\_\_\_

Consulting Firm: \_\_\_\_\_

a. Contact information for consultant listed above:

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

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

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

**IV. PROJECT INFORMATION**

1. Total Property Area: \_\_\_\_\_square feet
2. Total Coastal Wetlands Area: \_\_\_\_\_square feet
3. Total Surface Water Area: \_\_\_\_\_square feet
4. Total Property Area (1) – Total Coastal Wetlands Area (2) – Total Surface Water Area (3) = Total Project Area: \_\_\_\_\_ square feet.
5. Existing Impervious Surface within Project Area: \_\_\_\_\_square feet
6. Existing Impervious Surface to be Removed/Demolished: \_\_\_\_\_square feet
7. Existing Impervious Surface to Remain: \_\_\_\_\_square feet
8. Total Onsite (within property boundary) Newly Constructed Impervious Surface (in square feet):

Buildings/Lots	
Impervious Pavement	
Pervious Pavement (total area / adjusted area w credit applied)	/
Impervious Sidewalks	
Pervious Sidewalks (total area / adjusted area w credit applied)	/
Other	
Future Development	
<b>Total Onsite Newly Constructed Impervious Surface</b>	

9. Total Onsite Impervious Surface  
(Existing Impervious Surface to remain + Onsite Newly Constructed Impervious Surface) \_\_\_\_\_square feet
10. Net Change in Onsite Impervious Surface (+ for net increase, - for net decrease) \_\_\_\_\_square feet
11. Project percent of impervious area: (Total Onsite Impervious Surface / Total Project Area) x100 = \_\_\_\_\_%
12. Total Offsite Newly Constructed Impervious Area (in square feet):

Impervious Pavement	
Pervious Pavement (total area / adjusted area w credit applied)	/
Impervious Sidewalks	
Pervious Sidewalks (total area / adjusted area w credit applied)	/
Other	
<b>Total Offsite Newly Constructed Impervious Surface</b>	

13. Complete the following information for each Stormwater SCM drainage area. Low Density and Drainage Plan projects (with no permeable pavements) may omit this section and skip to Section V.

Basin Information			
Receiving Stream Name			
Receiving Stream Index Number			
Stream Classification			
Total Drainage Area (sf)			
On-Site Drainage Area (sf)			
Off-Site Drainage Area (sf)			
Buildings/Lots (sf)			
Impervious Pavement (sf)			
Pervious Pavement (total / adjusted) (sf)	/	/	/
Impervious Sidewalks (sf)			
Pervious Sidewalks (total / adjusted) (sf)	/	/	/
Other (sf)			
Future Development (sf)			
Existing Impervious to remain (sf)			
Offsite (sf)			
<b>Total Impervious Area (sf)</b>			
<b>Percent Impervious Area (%)</b>			

Basin Information			
Receiving Stream Name			
Receiving Stream Index Number			
Stream Classification			
Total Drainage Area (sf)			
On-Site Drainage Area (sf)			
Off-Site Drainage Area (sf)			
Buildings/Lots (sf)			
Impervious Pavement (sf)			
Pervious Pavement (total / adjusted) (sf)	/	/	/
Impervious Sidewalks (sf)			
Pervious Sidewalks (total / adjusted) (sf)	/	/	/
Other (sf)			
Future Development (sf)			
Existing Impervious to remain (sf)			
Offsite (sf)			
<b>Total Impervious Area (sf)</b>			
<b>Percent Impervious Area (%)</b>			

**V. SUBMITTAL REQUIREMENTS**

Only complete application packages will be accepted and reviewed by the City. A complete package includes all of the items listed below. Copies of forms, deed restrictions, checklists as well as detailed instructions on how to complete this application form may be downloaded from the City of Wilmington Plan Review website below:

<https://www.wilmingtonnc.gov/departments/engineering/plan-review/stormwater-permits>

The complete application package should be submitted to the following address:

City of Wilmington – Engineering  
Plan Review Section  
212 Operations Center Dr.  
Wilmington, NC 28412

Please indicate that the following required information have been provided by initialing in the space provided for each item.

	Initials
1. One completed Stormwater Management Permit Application Form.	_____
2. One completed Supplement Form for each SCM proposed (signed, sealed and dated).	_____
3. One completed Operation & Maintenance agreement for each <u>type</u> of SCM.	_____
4. Proposed Deed Restrictions and Restrictive Covenants (for all subdivisions)	_____
5. Appropriate stormwater permit review fee.	_____
6. Minimum requirements identified on the Engineering Plan Review Checklist have been addressed.	_____
7. One set of calculations (sealed, signed and dated).	_____
8. A detailed narrative (one to two pages) describing the stormwater treatment/management system for the project.	_____
9. A USGS map identifying the site location. If the receiving stream is reported as class SA or the receiving stream drains to class SA waters within ½ mile of the site boundary, include the ½ mile radius on the map.	_____
10. A copy of the soils report, if applicable. Must meet NCDEQ SCM Manual and MDC requirements for the type of SCM proposed. The report must include boring logs and a map of boring locations.	_____
11. One full set of plans <u>folded to 8.5" x 14"</u> .	_____
12. A map delineating and labeling the drainage area for each SCM proposed.	_____
13. A map delineating and labeling the drainage area for each inlet and conveyance proposed.	_____
14. A digital copy of the entire submittal package (can be submitted via flash drive, CD, email, dropbox or other file sharing system).	_____

**VI. PROPERTY OWNER AUTHORIZATION** (If Section III(2) has been filled out, complete this section)

I, \_\_\_\_\_, certify that I own the property identified in this permit application, and thus give permission to \_\_\_\_\_ with \_\_\_\_\_ to develop the project as currently proposed. A copy of the lease agreement or pending property sales contract has been provided with the submittal, which indicates the party responsible for the operation and maintenance of the stormwater system.

As the legal property owner I acknowledge, understand, and agree by my signature below, that if my designated agent \_\_\_\_\_ dissolves their company and/or cancels or defaults on their lease agreement, or pending sale, responsibility for compliance with the City of Wilmington Stormwater Permit reverts back to me, the property owner. As the property owner, it is my responsibility to notify the City of Wilmington immediately and submit a completed Name/Ownership Change Form within 30 days; otherwise I will be operating a stormwater treatment facility without a valid permit. I understand that the operation of a stormwater treatment facility without a valid permit is a violation of the City of Wilmington Municipal Code of Ordinances and may result in appropriate enforcement including the assessment of civil penalties.

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

SEAL
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I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_, County of \_\_\_\_\_, do hereby certify that \_\_\_\_\_ personally appeared before me this day of \_\_\_\_\_, \_\_\_\_\_, and acknowledge the due execution of the application for a stormwater permit. Witness my hand and official seal,  
\_\_\_\_\_  
My commission expires: \_\_\_\_\_

**VII. APPLICANT'S CERTIFICATION**

I, \_\_\_\_\_ 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 the applicable rules under the City's Comprehensive Stormwater Ordinance.

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

SEAL
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I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_, County of \_\_\_\_\_, do hereby certify that \_\_\_\_\_ personally appeared before me this day of \_\_\_\_\_, \_\_\_\_\_, and acknowledge the due execution of the application for a stormwater permit. Witness my hand and official seal,  
\_\_\_\_\_  
My commission expires: \_\_\_\_\_