



Public Services

Engineering 212 Operations Center Drive Wilmington, NC 28412 910 341-7807 910 341-5881 fax wilmingtonnc.gov Dial 711 TTY/Voice

COMPREHENSIVE STORMWATER MANAGEMENT PERMIT

DRAINAGE PLAN

SECTION 1 - APPROVAL

Having reviewed the construction drawings, application and all supporting materials, the City of Wilmington has determined that the proposed development meets the requirements for Drainage Plan Approval through the City of Wilmington's Comprehensive Stormwater Ordinance.

PERMIT HOLDER: Grace Hodgkins

PROJECT:

Grace Hodgkins Residence

ADDRESS:

601 S. Front Street

PERMIT #:

2021003

DATE:

March 11, 2021

Therefore, the above referenced site is hereby approved and subject to all conditions set forth in Section 2 of this approval and all applicable provisions of the City of Wilmington Comprehensive Stormwater Management Ordinance.

This permit shall be effective from the date of issuance until modified or rescinded and shall be subject to the following specified conditions and limitations:

Section 2 - CONDITIONS

- 1. This approval is valid only for the stormwater management system as proposed on the approved stormwater management plans dated March 5, 2021.
- 2. The project will be limited to the amount and type of built-upon area indicated in Section IV of the Stormwater Management Application Form submitted as part of the approved stormwater permit application package, and per the approved plans.
- 3. This permit shall become void unless the facilities are constructed in accordance with the approved stormwater management plans, specifications and supporting documentation.
- 4. The permittee shall submit a revised stormwater management application packet to the City of Wilmington and shall have received approval prior to construction, for any modification to the approved plans, including, but not limited to, those listed below:
 - a. Any revision to any item shown on the approved plans, including the stormwater management measures, built-upon area, details, etc.
 - b. Redesign or addition to the approved amount of built-upon area.
 - c. Further subdivision, acquisition, lease or sale of any part of the project area.
 - d. Filling in, altering, or piping of any vegetative or piped conveyance shown on the approved plan.
 - e. Construction of any permitted future areas shown on the approved plans.





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- 5. A copy of the approved plans and specifications shall be maintained on file by the Permittee.
- 6. During construction, erosion shall be kept to a minimum and any eroded areas of the system will be repaired immediately.
- 7. All areas must be maintained in a permanently stabilized condition. If vegetated, permanent seeding requirements must follow the guidelines established in the North Carolina Erosion and Sediment Control Planning and Design Manual unless an alternative is specified and approved by the City of Wilmington.
- 8. Upon completion of construction, before a Certificate of Occupancy shall be granted, and prior to operation of this permitted facility, the applicant shall submit to the City of Wilmington as-built plans for all stormwater management facilities. The plans shall show the field location, type, depth and invert of all devices, as-installed. A certification shall be submitted, along with all supporting documentation that specifies, under seal that the as-built stormwater measures, controls and devices are in compliance with the approved stormwater management plans. A final inspection by City of Wilmington personnel will be required prior to issuance of a certificate of occupancy or operation of the permitted facility.
- 9. This permit is not transferable except after application and approval by the City of Wilmington. In the event of a change of ownership, name change or change of address the permittee must submit a completed Name/Ownership Change form to the City of Wilmington at least 30 days prior to the change. It shall be signed by all applicable parties and be accompanied by all required supporting documentation. Submittal of a complete application shall not be construed as an approved application. The application will be reviewed on its own merits by the City of Wilmington and may or may not be approved. The project must be in compliance with the terms of this permit in order for the transfer request to be considered. The permittee is responsible for compliance with all permit conditions until such time as the City of Wilmington approves the transfer request.
- 10. Failure to abide by the conditions and limitations contained in this permit may subject the Permittee to enforcement action by the City of Wilmington, in accordance with Sections 18-52 and 18-53 of the Land Development Code.
- 11. The City of Wilmington 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 City of Wilmington for modifying the site to meet minimum requirements. The permittee shall provide copies of revised plans and certification in writing to the City of Wilmington that the changes have been made.
- 12. 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) having jurisdiction.
- 13. 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 the City of Wilmington, such as the construction of additional or replacement stormwater management systems.





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- 14. The permittee grants City of Wilmington Staff permission to enter the property during normal business hours for the purpose of inspecting all components of the permitted stormwater management facility.
- 15. The permit issued shall continue in force and effect until revoked or terminated by the City of Wilmington. The permit may be modified, revoked and reissued or terminated for cause. The filing of a request for a permit modification, revocation and re-issuance or termination does not stay any permit condition.
- 16. The approved stormwater management plans and all documentation submitted as part of the approved stormwater management permit application package for this project are incorporated by reference and are enforceable parts of the permit.
- 17. If any one or more of the conditions of this permit is found to be unenforceable or otherwise invalidated, all remaining conditions shall remain in full effect.

Stormwater Management Permit issued this the 11th day of March, 2021.

for Sterling Cheatham, City Manager

City of Wilmington

RECEIVED
By waltonj at 10:02 am, Jan 07, 2021



GENERAL INFORMATION

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STORMWATER MANAGEMENT PERMIT APPLICATION FORM (Form SWP 2.3)

1. Project Name (subdivision, facility, or establishment name - should be consistent with project name on plans, specifications, letters, operation and maintenance agreements, etc.): Grace Hodgkins Residence 2. Location of Project (street address): 601 S. Front Street Zip: 28401 City: Wilmington County: New Hanover 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: Grace Hodgkins, Owner Signing Official & Title: Grace Hodgkins, Owner



	City: Wilmington	State:	NC	Zip: 28401
	Phone: 910-352-6256			
	b. Please check the appropriate box. The ap	•	ted abo	ove is:
	The property owner/Purchaser (Skip to item Lessee (Attach a copy of the lease agreement ar Developer (Complete items 2 and 2a below.)	•	items 2 a	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:
3. (Phone:(Optional) Other Contact name and title (such as a			
((Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization:	a constructi	on supe	ervisor) who would like to be copied
((Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title:	a constructi	on supe	ervisor) who would like to be copied
((Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite	a constructi m 3 above	on supe	ervisor) who would like to be copied
((Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address:	a constructi m 3 above	on supe	ervisor) who would like to be copied
((Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite	a constructi m 3 above	on supe	ervisor) who would like to be copied
((Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address:	m 3 above	on supe	ervisor) who would like to be copied
. A f	(Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address: City:	m 3 aboveState:Email: sh to design	on supe	ervisor) who would like to be copied Zip:
	(Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address: City: Phone: Agent Authorization: Complete this section if you wis firm (such as a consulting engineer and /or firm) so the project (such as addressing requests for additional information).	m 3 aboveState:Email: sh to design	on supe	ervisor) who would like to be copied Zip:
	(Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address: City: Phone: Agent Authorization: Complete this section if you wis firm (such as a consulting engineer and /or firm) so that project (such as addressing requests for additional informations and the consulting Engineer: Shane Lippard, PE	m 3 aboveState:Email: sh to design	on supe	ervisor) who would like to be copied Zip:
	(Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address: City: Phone: Agent Authorization: Complete this section if you wis firm (such as a consulting engineer and /or firm) so the project (such as addressing requests for additional information).	m 3 aboveState:Email: sh to design they may ormation).	on supe	ervisor) who would like to be copied Zip:
	(Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address: City: Phone: Agent Authorization: Complete this section if you wis firm (such as a consulting engineer and /or firm) so the project (such as addressing requests for additional informations of the consulting Engineer: Shane Lippard, PE Consulting Firm: Right Angle Engineering, PC	m 3 aboveState:Email: sh to design they may ormation).	on supe	ervisor) who would like to be copied Zip:
	(Optional) Other Contact name and title (such as a on all correspondence: Other Contact Person / Organization: Signing Official & Title: a. Contact information for person listed in ite Street Address: City: Phone: Agent Authorization: Complete this section if you wis firm (such as a consulting engineer and /or firm) so the project (such as addressing requests for additional information Engineer: Shane Lippard, PE Consulting Firm: Right Angle Engineering, PC a. Contact information for consultant listed all	m 3 aboveState:Email: sh to design they may ormation).	ate auti	ervisor) who would like to be copied Zip: hority to another individual and/or



IV. PROJECT INFORMATION

1.	Total Property Area: 4620square feet
2.	Total Coastal Wetlands Area: 0square feet
3.	Total Surface Water Area: 0 square feet
4.	Total Property Area (1) – Total Coastal Wetlands Area (2) – Total Surface Water Area (3) = Total Project Area: 4620 square feet.
5.	Existing Impervious Surface within Project Area: 4190 square feet
6.	Existing Impervious Surface to be Removed/Demolished: 3284 square feet
7.	Existing Impervious Surface to Remain: 906 square feet
8.	Total Onsite (within property boundary) Newly Constructed Impervious Surface (in square feet):

Buildings/Lots		1740
Impervious Paveme	ent	329
Pervious Pavement	t (total area / adjusted area w credit applied)	1
Impervious Sidewa	lks	85
Pervious Sidewalks	s (total area / adjusted area w credit applied)	/
Other	(Describe)	
Future Developmer	nt	
Total Onsite Newly	v Constructed Impervious Surface	2154

9. Total Onsite Impervious Surface (Existing Impervious Surface to remain + Onsite Newly Constructed Impervious Surface) 3060	_square feet
10. Net Change in Onsite Impervious Surface (+ for net increase, - for net decrease) -1130	_square feet
11. Project percent of impervious area: (Total Onsite Impervious Surface / Total Project Area) x100) = <u>66.2</u> %
12. Total Offsite Newly Constructed Impervious Area (in square feet):	

Impervious Pavement	590
Pervious Pavement (total area / adjusted area v	v credit applied) /
Impervious Sidewalks	50
Pervious Sidewalks (total area / adjusted area v	v credit applied) /
Other (Describe)	
Total Offsite Newly Constructed Impervious	Surface 640



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	Type of SCM	Type of SCM	Type of SCM
	SCM#	SCM#	SCM#
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)	1	1	1
Impervious Sidewalks (sf)			
Pervious Sidewalks (total / adjusted) (sf)	1	1	1
Other (sf)			
Future Development (sf)	Ė		
Existing Impervious to remain (sf)			
Offsite (sf)			
Total Impervious Area (sf)			
Percent Impervious Area (%)			

Basin Information	Type of SCM SCM#	Type of SCM SCM#	Type of SCM SCM#
Receiving Stream Name	5.00		
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)	1	1	1
Impervious Sidewalks (sf)			
Pervious Sidewalks (total / adjusted) (sf)	/	1	1
Other (sf)			
Future Development (sf)			
Existing Impervious to remain (sf)			
Offsite (sf)			
Total Impervious Area (sf)			
Percent Impervious Area (%)			



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.	SL
2.	One completed Supplement Form for each SCM proposed (signed, sealed and dated).	<u> </u>
3.	One completed Operation & Maintenance agreement for each type of SCM.	NA
4.	Proposed Deed Restrictions and Restrictive Covenants (for all subdivisions)	NA
5.	Appropriate stormwater permit review fee.	SL
6.	Minimum requirements identified on the Engineering Plan Review Checklist have been addressed.	SL
7.	One set of calculations (sealed. signed and dated).	SL
8.	A detailed narrative (one to two pages) describing the stormwater treatment/management system for the project.	SL
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 $\frac{1}{2}$ mile of the site boundary, include the $\frac{1}{2}$ mile radius on the map.	SL
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.	NA
11.	One full set of plans folded to 8.5" x 14".	SL
12.	A map delineating and labeling the drainage area for each SCM proposed.	SL
13.	A map delineating and labeling the drainage area for each inlet and conveyance proposed.	SL
14.	A digital copy of the entire submittal package (can be submitted via flash drive, CD, email, dropbox or other file sharing system).	SL



VI. PROPERTY OWNER AUT	HORIZATION (If Section III(2) has been filled out, complete this section)	
l,	, certify that I own the property identified in this permit application,	and
thus give permission to	with with rproposed. A copy of the lease agreement or pending property sales cont	
to develop the project as currently	proposed. A copy of the lease agreement or pending property sales cont ttal, which indicates the party responsible for the operation and maintenar	ract
the stormwater system.	ital, which indicates the party responsible for the operation and maintenar	ice oi
As the legal property owner I ackr	owledge, understand, and agree by my signature below, that if my design	nated
agent	dissolves their company and/or cancels or defaults on their lease	
	onsibility for compliance with the City of Wilmington Stormwater Permit reversibility for compliance with the City of Wilmingtor sthe property owner, it is my responsibility to notify the City of Wilmingtor	
	ted Name/Ownership Change Form within 30 days; otherwise I will be ope	
	nout a valid permit. I understand that the operation of a stormwater treatm	
	iolation of the City of Wilmington Municipal Code of Ordinances and may	result
in appropriate enforcement includi	ng the assessment of civil penalties.	
Signature:	Date:	
_		
SEAL	I,, a Notary Public for t	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	ər
	permit. Witness my hand and official seal,	
	My commission expires:	
	10.4710.11	
VII. APPLICANT'S CERTIF		
GRACE HODE	certify that the information included on this permit applicati	ion
form is, to the best of my knowledge	je, correct and that the project will be constructed in conformance with the	3
	deed restrictions and protective covenants will be recorded, and that the	
	requirements of the applicable rules under the City's Comprehensive	
Stormwater Ordinance.		
Signature:	m / pde	
Signature.	Date. 100/20	
SEAL	A CANADA	
	I, DAWN BORARD, a Notary Public for t	he
	State of NORTH CANOLINA County of NEW IHANOUS, do	
DAWN BERARD	hereby certify that	
Notary Public, North Carol Pender County	personally appeared before me this day of ale CC 10 19 0000	20,20
My Commission Expire	$\mathbb{R}^{\mathbb{R}}$ and acknowledge the due execution of the application for a stormwate	er .
	permit. Witness my hand and official seal,	
	Marin	
	My commission expires: 4 : 24 - 2028	