



Public Services

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

October 18, 2021

Scott Heffernan (Member/Manager) CLOS Properties, LLC 20 Old Eastwood Road Wilmington, NC 28403

Subject: Stormwater Management Permit No. 2020032R1

Cape Fear Moto Group High Density Development

Dear Mr. Heffernan:

The City of Wilmington Engineering Division has received a request for a revision to the Stormwater Management Permit for Cape Fear Moto Group. Having reviewed the application and all supporting materials, the City of Wilmington has determined that the proposed revision meets the requirements of the City of Wilmington's Comprehensive Stormwater Ordinance.

The revisions include:

- Reduction in building square footage;
- Increased square footage of impervious pavement, impervious sidewalks and future development
- Increase in impervious percentage from 68.20% to 69.40%.

Please be aware all terms and conditions of the permit Issued on February 9, 2021 remain in full force and effect. Any additional changes to the approved plans must be approved by this office prior to construction. The issuance of the plan revision does not preclude the permittee from complying with all other applicable statutes, rules, regulations, or ordinances which may have jurisdiction over the proposed activity and obtaining a permit or approval prior to construction.

The revised stamped, approved stormwater management drawings will be released for construction by the Wilmington Planning Division under separate cover. Please replace any old plan sheets from the approved set with the new, revised sheet. An electronic copy of the approved drawing set, permit, application, and supplementary documents will be maintained by the Wilmington Engineering Division. If you have any questions, or need additional information, please contact Richard Christensen at (910) 341-7813 or richard.christensen@wilmingtonnc.gov

Sincerely,

Richard Christensen

for Anthony Caudle, City Manager City of Wilmington

cc: Charles D. Cazier, PE, Intracoastal Engineering, PLLC. Patrick O'Mahony, Associate Planner, City of Wilmington





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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.): Cape Fear Moto Group 2 |
| 2. | Location of Project (street address): 5 Garris Rd. |
| | City: Wilmington County: New Hanover Zip: 28403 |
| 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: CLOS Properties, LLC |
| | Signing Official & Title: Scott Heffernan (Member/Manager) |



| | a. Contact information for Applicant / Signing | g Official: | | |
|----|--|--------------|-------------|-----------------------------------|
| | Address: 20 Old Eastwood Rd. | | | |
| | City: Wilmington | State: | NC | Zip: _28403 |
| | Phone: 910-202-4662 | Email: | shane@ | gaudicapefear.com |
| | b. Please check the appropriate box. The ap | - | ted above | e is: |
| | The property owner/Purchaser (Skip to item Lessee (Attach a copy of the lease agreement at Developer (Complete items 2 and 2a below.) | | items 2 and | 2a below) |
| 2. | Print Property Owner's name and title (if different | | | |
| | Property Owner / Organization: Shane Hefferna | | | /Audi Cape Fear) |
| | Signing Official & Title: Scott Heffernan (Memb | er/Manag | er) | |
| | a. Contact information for Property Owner: | | | |
| | Street Address: 255 Old Eastwood Rd. | | | |
| | City: Wilmington | | | z _{ip: 28403} |
| | Phone: 910-202-4662 | Email: | shane@ | Daudicapefear.com |
| 3. | (Optional) Other Contact name and title (such as on all correspondence: | a constructi | ion superv | isor) who would like to be copied |
| | Other Contact Person / Organization: | | | |
| | Signing Official & Title: | | | |
| | a. Contact information for person listed in ite | em 3 above | e: | |
| | Street Address: | | | |
| | City: | State: | | Zip: |
| | Phone: | Email: | | |
| 4. | Agent Authorization: Complete this section if you wi firm (such as a consulting engineer and /or firm) so the project (such as addressing requests for additional info | at they may | | |
| | Consulting Engineer: Charles D. Cazier, P.E. | | | |
| | Consulting Firm: Intracoastal Engineering, PLL | C | | |
| | a. Contact information for consultant listed a | bove: | | |
| | Mailing Address: 5725 Oleander Dr. Unit E- | -7 | | |
| | City: Wilmington | State: | NC | Zip: 28403 |
| | Phone: 910.859.8983 | Email: | . I P / | @intracoastalengineering.com |
| | | | | |



IV. PROJECT INFORMATION

| 1. | Total Property Area: 93463 square feet |
|----|---|
| 2. | Total Coastal Wetlands Area: 0square feet |
| 3. | Total Surface Water Area: 0square feet |
| 4. | Total Property Area (1) – Total Coastal Wetlands Area (2) – Total Surface Water Area (3) = Total Project Area: 95463 square feet. |
| 5. | Existing Impervious Surface within Project Area: 0square feet |
| 6. | Existing Impervious Surface to be Removed/Demolished: 0square feet |
| 7. | Existing Impervious Surface to Remain: 0square feet |
| 8 | Total Onsite (within property houndary) Newly Constructed Impervious Surface (in square feet) |

| Buildings/Lots | 12,646 | | |
|--|--------|-------|-------|
| Impervious Pavement | 39,940 | | |
| Pervious Pavement (total area / adjusted area w credit applied) | 1,900 | 1 | 1,900 |
| Impervious Sidewalks | | 7,510 | |
| Pervious Sidewalks (total area / adjusted area w credit applied) | | 1 | |
| Other | | | |
| Future Development | | 4,225 | |
| Total Onsite Newly Constructed Impervious Surface | 6 | 6,221 | |

9. Total Onsite Impervious Surface
 (Existing Impervious Surface to remain + Onsite Newly Constructed Impervious Surface) 66,221 square feet
 10. Net Change in Onsite Impervious Surface (+ for net increase, - for net decrease) +66,221 square feet

11. Project percent of impervious area: (Total Onsite Impervious Surface / Total Project Area) x100 = 69.4%

12. Total Offsite Newly Constructed Impervious Area (in square feet):

| Impervious Pave | ment | 1,215 |
|----------------------|---|-------|
| Pervious Pavem | Pervious Pavement (total area / adjusted area w credit applied) | |
| Impervious Sidewalks | | 1,175 |
| Pervious Sidewa | 1 | |
| Other | Concrete Driveway Aprons | 1,020 |
| Total Offsite Ne | wly Constructed Impervious Surface | 3,410 |



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 Wet Pond SCM # 1 | Type of SCM SCM# | Type of SCM SCM# |
|--|---------------------------------|---------------------|---------------------|
| Receiving Stream Name | Spring Branch | | |
| Receiving Stream Index Number | 18-74-63-1 | | |
| Stream Classification | C;SW | | |
| Total Drainage Area (sf) | 89,900 | | |
| On-Site Drainage Area (sf) | 88,430 | | |
| Off-Site Drainage Area (sf) | 1,470 | | |
| Buildings/Lots (sf) | 12,646 | | |
| Impervious Pavement (sf) | 39,940 | | |
| Pervious Pavement (total / adjusted) (sf) | 1,900 / 1,900 | 1 | 1 |
| Impervious Sidewalks (sf) | 7,510 | | |
| Pervious Sidewalks (total / adjusted) (sf) | 1 | 1 | 1 |
| Other (sf) | | | |
| Future Development (sf) | 4,225 | | |
| Existing Impervious to remain (sf) | | | |
| Offsite (sf) | 1,265 | | |
| Total Impervious Area (sf) | 67,486 | | |
| Percent Impervious Area (%) | 75.1 | | |

| Basin Information | Type of SCM | Type of SCM | Type of SCM |
|--|-------------|-------------|-------------|
| Basiii iiiioiiiiaiioii | 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 |
| Impervious Sidewalks (sf) | | | |
| Pervious Sidewalks (total / adjusted) (sf) | 1 | 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.

| 1. | One completed | Stormwater | Management | Permit Applicati | on Form. |
|----|---------------|------------|------------|--------------------|----------|
| | One completed | Otominator | managomon | . Ominica approach | |

- 2. One completed Supplement Form for each SCM proposed (signed, sealed and dated).
- 3. One completed Operation & Maintenance agreement for each type 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 folded to 8.5" x 14".
- 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).



















| - 1 11 10 | ORIZATION (If Section III(2) has been filled out, complete this section) | | |
|--|---|--|--|
| 1, Scot Hetternow | , certify that I own the property identified in this permit application, and | | |
| thus give permission to | roposed. A copy of the lease agreement or pending property sales contract | | |
| to develop the project as currently pr | roposed. A copy of the lease agreement or pending property sales contract | | |
| | II, which indicates the party responsible for the operation and maintenance of | | |
| the stormwater system. | | | |
| As the legal property owner I sekney | wledge, understand, and agree by my signature below, that if my designated | | |
| | | | |
| agreement or pending sale, respons | sibility for compliance with the City of Wilmington Stormwater Permit reverts | | |
| back to me, the property owner. As t | 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 witho | ut a valid permit. I understand that the operation of a stormwater treatment | | |
| facility without a valid permit is a viol | lation of the City of Wilmington Municipal Code of Ordinances and may result | | |
| in appropriate enforcement including | the assessment of civil penalties. | | |
| 1.11 1111 | Date: 9/8//2/ | | |
| Signature: | Date: // 0// 0/ | | |
| | | | |
| SEAL MINISTER MANAGEMENT | I,, a Notary Public for the | | |
| THE R. SELLIN | I, JAMIE R. PEW, a Notary Public for the State of NC , County of NEW HANDVER, do | | |
| SOTARL | hereby certify that Scort Harris RN AN | | |
| 2/ 2 | personally appeared before me this day of 9/21, 2021, | | |
| 2 2 2 | and acknowledge the due execution of the application for a stormwater | | |
| Z CUBLIC S | permit. Witness my hand and official seal, | | |
| NO. TO COUNT | Tamie V. Le | | |
| The FM william | | | |
| en e | My commission expires: 4/25/26 | | |
| | | | |
| VII ADDI ICANTIC CEDTICIC | NATION | | |
| VII. APPLICANT'S CERTIFIC | SATION | | |
| 1. Scott Hefferman | certify that the information included on this permit application | | |
| | certify that the imbimation included on this permit application, correct and that the project will be constructed in conformance with the | | |
| approved plans, that the required de | ed restrictions and protective covenants will be recorded, and that the | | |
| proposed project complies with the r | requirements of the applicable rules under the City's Comprehensive | | |
| Stormwater Ordinance. | | | |
| 11/6 11 | | | |
| Signature: | Date: 9/21/21 | | |
| | | | |
| SEAL | Alatam Dublia for the | | |
| WILL B. P. P. | I, JAME R. PENM , a Notary Public for the | | |
| WIND THE | State of NEW HAMONER, do | | |
| SOTARY | hereby certify that SCOTT INSTERNAN | | |
| Z | personally appeared before me this day of $\frac{9/21}{2021}$, | | |
| AUBLIC C | and acknowledge the due execution of the application for a stormwater | | |
| The state of | permit. Witness my hand and official seal, | | |
| WALL VOVER CHILLIA | Jamie KR | | |
| Minter trans | My commission expires: 4/25/26 | | |

SUPPLEMENT-EZ COVER PAGE

FORMS LOADED

| _ | JECT INFORMATION | |
|---|--|------------------------|
| 1 | Project Name | Cape Fear Moto Group 2 |
| 2 | Project Area (ac) | 2.19 |
| 3 | Coastal Wetland Area (ac) | 0 |
| 4 | Surface Water Area (ac) | 0 |
| 5 | Is this project High or Low Density? | High |
| 6 | Does this project use an off-site SCM? | No |

| COM | PLIANCE WITH 02H .1003(4) | |
|-----|--|--|
| 7 | Width of vegetated setbacks provided (feet) | |
| 8 | Will the vegetated setback remain vegetated? | |
| 9 | Is BUA other that as listed in .1003(4)(c-d) out of the setback? | |
| 10 | Is streambank stabilization proposed on this project? | |

| 11 | Infiltration System | 0 |
|----|---------------------------------------|---|
| 12 | Bioretention Cell | 0 |
| 13 | Wet Pond | 1 |
| 14 | Stormwater Wetland | 0 |
| 15 | Permeable Pavement | 0 |
| 16 | Sand Filter | 0 |
| 17 | Rainwater Harvesting (RWH) | 0 |
| 18 | Green Roof | 0 |
| 19 | Level Spreader-Filter Strip (LS-FS) | 0 |
| 20 | Disconnected Impervious Surface (DIS) | 0 |
| 21 | Treatment Swale | 0 |
| 22 | Dry Pond | 0 |
| 23 | StormFilter | 0 |
| 24 | Silva Cell | 0 |
| 25 | Bayfilter | 0 |
| 26 | Filterra | 0 |

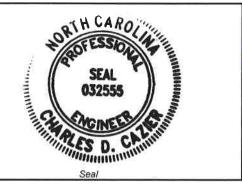
FORMS LOADED

| DESIGNER CERTIFICATION | | |
|------------------------|-------------------|-------------------------------------|
| 27 | Name and Title: | Charles D. Cazier, P.E. |
| 28 | Organization: | Intracoastal Engineering, PLLC |
| 29 | Street address: | 5725 Oleander Dr. Unit E-7 |
| 30 | City, State, Zip: | Wilmington |
| 31 | Phone number(s): | 910-859-8983 |
| 32 | Email: | charlie@intracoastalengineering.com |

Certification Statement:

Leartify, under penalty of law that this Supplement-EZ form and all supporting information were prepared under my direction or supervision; that the information provided in the form is, to the best of my knowledge and belief, true, accurate, and complete; and that the engineering plans, specifications, operation and maintenance agreements and other supporting information are consistent with the information provided here.

Designer



Signature of Designer

10 /12/2021

DRAINAGE AREAS

| 1 | Is this a high density project? | Yes |
|---|--|-----|
| 2 | If so, number of drainage areas/SCMs | 1 |
| | Is all/part of this project subject to previous rule | |
| 3 | versions? | No |

FORMS LOADED

| DRAINAGE AREA INFORMATION | | Entire Site | 1 |
|---------------------------|--|-------------|---------------|
| 4 | Type of SCM | | Wet Pond |
| 5 | Total BUA in project (sq ft) | 69631 sf | 67486 sf |
| | New BUA on subdivided lots (subject to permitting) | | |
| 6 | (sq ft) | - | - |
| | New BUA outside of subdivided lots (subject to | | |
| 7 | permitting) (sf) | | |
| 8 | Offsite - total area (sq ft) | 3410 sf | 1470 sf |
| 9 | Offsite BUA (sq ft) | 3410 sf | 1265 sf |
| 10 | Breakdown of new BUA outside subdivided lots: | | |
| 10 | - Parking (sq ft) | 39940 sf | 39940 sf |
| | - Sidewalk (sq ft) | 7510 sf | 7510 sf |
| | - Roof (sq ft) | 12646 sf | 12646 sf |
| - Roadway (sq ft) | | - | - |
| | - Future (sq ft) | 4225 sf | 4225 sf |
| | - Other, please specify in the comment box | | |
| | below (sq ft) | 1900 sf | 1900 sf |
| | New infiltrating permeable pavement on | | |
| 11 | subdivided lots (sq ft) | - | - |
| | New infiltrating permeable pavement outside of | | |
| 12 | subdivided lots (sq ft) | | - |
| | Exisitng BUA that will remain (not subject to | | |
| 13 | permitting) (sq ft) | - | - |
| 14 | Existing BUA that is already permitted (sq ft) | - | - |
| 15 | Existing BUA that will be removed (sq ft) | | - |
| 16 | Percent BUA | 73% | 75% |
| 17 | Design storm (inches) | - | 1.5" |
| 18 | Design volume of SCM (cu ft) | - | 8154 cf |
| 19 | Calculation method for design volume | - | Simple Method |

ADDITIONAL INFORMATION

Please use this space to provide any additional information about the drainage area(s):

^{*}Pervious pavers- Not Taking any Credit*

WET POND

| 1 | Drainage area number | 1 |
|----|---|------------------|
| | Design volume of SCM (cu ft) | 8154 cf |
| | AL MDC FROM 02H .1050 | |
| | Is the SCM sized to treat the SW from all surfaces at build-out? | Yes Yes |
| | Is the SCM located away from contaminated soils? | Yes |
| | What are the side slopes of the SCM (H:V)? | 3:1 |
| | Does the SCM have retaining walls, gabion walls or other engineered | 5.1 |
| 6 | side slopes? | No |
| | Are the inlets, outlets, and receiving stream protected from erosion | 140 |
| 7 | (10-year storm)? | Yes |
| | Is there an overflow or bypass for inflow volume in excess of the | 163 |
| 8 | design volume? | Yes |
| | What is the method for dewatering the SCM for maintenance? | Pump (preferred) |
| | If applicable, will the SCM be cleaned out after construction? | Yes |
| | Does the maintenance access comply with General MDC (8)? | Yes |
| | Does the drainage easement comply with General MDC (9)? | Yes |
| 12 | If the SCM is on a single family lot, does (will?) the plat comply with | 163 |
| 13 | General MDC (10)? | |
| 13 | General MDG (10): | |
| 14 | Is there an O&M Agreement that complies with General MDC (11)? | Yes |
| | Is there an O&M Plan that complies with General MDC (12)? | Yes |
| | Does the SCM follow the device specific MDC? | Yes |
| | Was the SCM designed by an NC licensed professional? | Yes |
| | | 165 |
| | OND MDC FROM 02H .1053 | CA/DA |
| | Method used | SA/DA |
| 19 | Has a stage/storage table been provided in the calculations? | Yes |
| 00 | Elevation of the excavated main pool depth (bottom of sediment | 00.00 |
| 20 | removal) (fmsl) | 23.00 |
| 04 | | 24.00 |
| | Elevation of the main pool bottom-(top of sediment removal) (fmsl) | 24.00 |
| | Elevation of the bottom of the vegetated shelf (fmsl) | 31.50 |
| | Elevation of the permanent pool (fmsl) | 32.00 |
| | Elevation of the top of the vegetated shelf (fmsl) | 32.50 |
| | Elevation of the temporary pool (fmsl) | 34.00 |
| | Surface area of the main permanent pool (square feet) | 3927 |
| | Volume of the main permanent pool (cubic feet) | 14518 cf |
| | Average depth of the main pool (feet) | 4.38 ft |
| | Average depth equation used | Equation 3 |
| 30 | 0 1 , 1 1 , , | 267.0 ft |
| 31 | If using equation 3, width of submerged veg. shelf (feet) | 3.0 ft |
| | Volume of the forebay (cubic feet) | 2176 cf |
| | Is this 15-20% of the volume in the main pool? | Yes |
| | Clean-out depth for forebay (inches) | 12 in |
| | Design volume of SCM (cu ft) | 8154 cf |
| | Is the outlet an orifice or a weir? | Orifice |
| 37 | If orifice, orifice diameter (inches) | 1.25 in |
| 38 | , , | |
| 39 | If weir, weir length (inches) | |
| 40 | Drawdown time for the temporary pool (days) | 2.37 |
| | Are the inlet(s) and outlet located in a manner that avoids short- | |
| 41 | circuiting? | Yes |
| 42 | Are berms or baffles provided to improve the flow path? | Yes |
| 43 | Depth of forebay at entrance (inches) | 60 in |
| 44 | Depth of forebay at exit (inches) | 48 in |
| 45 | Does water flow out of the forebay in a non-erosive manner? | Yes |
| | | |

WET POND

| 46 Width of the vegetated shelf (feet) 47 Slope of vegetated shelf (H:V) 50 Does the orifice drawdown from below the top surface of the permanent pool? Does the pond minimize impacts to the receiving channel from the 1-49 yr, 24-hr storm? Are fountains proposed? (If Y, please provide documentation that MDC(9) is met.) No |
|---|
| Does the orifice drawdown from below the top surface of the permanent pool? Does the pond minimize impacts to the receiving channel from the 1-yr, 24-hr storm? Are fountains proposed? (If Y, please provide documentation that |
| 48 permanent pool? Does the pond minimize impacts to the receiving channel from the 1- 49 yr, 24-hr storm? Are fountains proposed? (If Y, please provide documentation that |
| Does the pond minimize impacts to the receiving channel from the 1- 49 yr, 24-hr storm? Are fountains proposed? (If Y, please provide documentation that |
| 49 yr, 24-hr storm? Are fountains proposed? (If Y, please provide documentation that |
| Are fountains proposed? (If Y, please provide documentation that |
| |
| 50 MDC(9) is met.) |
| |
| |
| 51 Is a trash rack or other device provided to protect the outlet system? Yes |
| |
| 52 Are the dam and embankment planted in non-clumping turf grass? Yes |
| 53 Species of turf that will be used on the dam and embankment Fescue |
| 54 Has a planting plan been provided for the vegetated shelf? |
| ADDITIONAL INFORMATION |
| Please use this space to provide any additional information about the |
| 55 wet pond(s): |
| |
| |
| |
| |

| Permit Number: |
|--|
| (to be provided by City of Wilmington) |
| SCM Drainage Basin #: |

Wet Detention Basin Operation and Maintenance Agreement

I will keep a maintenance record on this SCM. This maintenance record will be kept in a log in a known set location. Any deficient SCM elements noted in the inspection will be corrected, repaired or replaced **immediately**. These deficiencies can affect the integrity of structures, safety of the public, and the pollutant removal efficiency of the SCM.

The wet detention basin system is defined as the wet detention basin, pretreatment including forebays and the vegetated filter if one is provided.

| This system (check one): | |
|--------------------------|---|
| ☐ does ✓ does not | incorporate a vegetated filter at the outlet. |

Important maintenance procedures:

- Immediately after the wet detention basin is established, the plants on the vegetated shelf and perimeter of the basin should be watered twice weekly if needed, until the plants become established (commonly six weeks).
- No portion of the wet detention pond should be fertilized after the first initial fertilization that is required to establish the plants on the vegetated shelf.
- Stable groundcover should be maintained in the drainage area to reduce the sediment load to the wet detention basin.
- If the basin must be drained for an emergency or to perform maintenance, the flushing of sediment through the emergency drain should be minimized to the maximum extent practical.
- Once a year, a dam safety expert should inspect the embankment.

After the wet detention pond is established, it should be inspected **once a month and within 24 hours after every storm event greater than 1.5 inches**. Records of operation and maintenance should be kept in a known set location and must be available upon request.

Inspection activities shall be performed as follows. Any problems that are found shall be repaired immediately.

| SCM element: | Potential problem: | How to remediate the problem: |
|--------------------------|--|--|
| The entire SCM | Trash/debris is present. | Remove the trash/debris. |
| The perimeter of the SCM | Areas of bare soil and/or erosive gullies have formed. | Regrade the soil if necessary, to remove the gully, and then plant a ground cover and water until it is established. Provide lime and a one-time fertilizer application. |
| | Vegetation is too short or too | Maintain vegetation at a height of |
| | long. | approximately six inches. |

| Permit Num | ber: |
|------------|---------------------------------|
| (to be | provided by City of Wilmington) |
| SCM Draina | ge Basin #: |

| SCM element: | Potential problem: | How to remediate the problem: |
|-------------------------|--|---|
| The inlet device: | The pipe is clogged. | Unclog the pipe. Dispose of the sediment off-site. |
| | The pipe is cracked or otherwise damaged. | Replace the pipe. |
| | Erosion is occurring in the swale. | Regrade the swale if necessary, to smooth it over and provide erosion control devices such as reinforced turf matting or riprap to avoid future problems with erosion. |
| | Stone verge is clogged or covered in sediment (if applicable). | Remove sediment and replace with clean stone. |
| The forebay | Sediment has accumulated to a depth greater than the original design depth for sediment storage. | Search for the source of the sediment and remedy the problem if possible. Remove the sediment and dispose of it in a location where it will not cause impacts to streams or the SCM. |
| | Erosion has occurred. | Provide additional erosion protection such as reinforced turf matting or riprap if needed to prevent future erosion problems. |
| | Weeds are present. | Remove the weeds, preferably by hand. If pesticide is used, wipe it on the plants rather than spraying. |
| The vegetated shelf | Best professional practices show that pruning is needed to maintain optimal plant health. | Prune according to best professional practices |
| | Weeds are present. | Remove the weeds, preferably by hand. If pesticide is used, wipe it on the plants rather than spraying. |
| | Plants are dead, diseased or dying. | Determine the source of the problem: soils, hydrology, disease, etc. Remedy the problem and replace plants. Provide a one-time fertilizer application to establish the ground cover if a soil test indicates it is necessary. |
| The main treatment area | Sediment has accumulated to a depth greater than the original design sediment storage depth. | Search for the source of the sediment and remedy the problem if possible. Remove the sediment and dispose of it in a location where it will not cause impacts to streams or the SCM. |

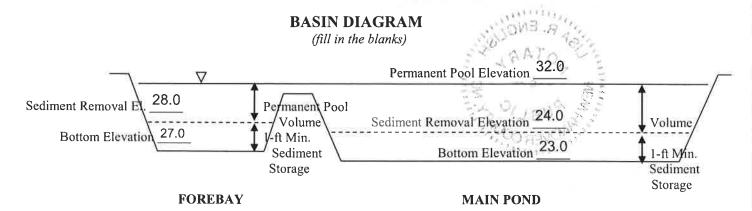
| Permit Number: |
|--|
| (to be provided by City of Wilmington) |
| SCM Drainage Basin #: |

| SCM element: | Potential problem: | How I will remediate the problem: |
|-------------------------------------|---|---|
| The main treatment area (continued) | Algal growth covers over 25% of the area. | Consult a professional to remove and control the algal growth. |
| | Cattails, phragmites or other invasive plants cover 50% of the basin surface. | Remove the plants by wiping them with pesticide (do not spray). |
| The embankment | Shrubs have started to grow on the embankment. | Remove shrubs immediately. |
| | Evidence of muskrat or beaver activity is present. | Use traps to remove muskrats and consult a professional to remove beavers. |
| | A tree has started to grow on the embankment. | Consult a dam safety specialist to remove the tree. |
| | An annual inspection by an appropriate professional shows that the embankment needs repair. (if applicable) | Make all needed repairs. |
| The outlet device | Clogging has occurred. | Clean out the outlet device. Dispose of the sediment off-site. |
| | The outlet device is damaged | Repair or replace the outlet device. |
| The receiving water | Erosion or other signs of damage have occurred at the outlet. | Contact the local NC Department of Environment and Natural Resources regional Office. |

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 $_8.0$ feet in the main pond, the sediment shall be removed.

When the permanent pool depth reads $_4.0$ feet in the forebay, the sediment shall be removed.



| Permit Number: | |
|----------------|------------------------------|
| (to be pro | vided by City of Wilmington) |

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

| Project name: Cape Fear Moto Group |
|--|
| SCM drainage basin number: 1 |
| |
| Print name: Scott Heffernan |
| Title: Member Manager |
| Address: 20 Old Eastwood Rd. |
| Phone: 910-202-4662 |
| Signature: At M |
| Date: 7/00/26 |
| |
| 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. |
| a Notary Public for the State of No., County of New Hangver, do hereby certify that Scott Hefferan personally appeared before me this 1 - 5 - 5 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 |
| county of New Hangver, do hereby certify that |
| Scott Heffernam personally appeared before me this |
| day of July 70, 2000, and acknowledge the due execution of the |
| forgoing wet detention basin maintenance requirements. Witness my hand and official |
| seal, |
| ALL ENGLY |
| STAN TAN DE |
| A A C A |
| E August A |
| NOVER CONTINUE TO SERVICE TO SERV |
| "Ministra |
| SEAL |
| |
| My commission expires $9-(2-2)$ |