



**Public Services**

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

November 2, 2021

Polly Taylor, Senior Vice President  
Flagship Wilmington Surgcare, LLC  
c/o Flagship Healthcare Properties  
2701 Coltsgate Road, Suite 300  
Charlotte, NC 28211

**Subject: Stormwater Management Permit No. 2010014R2  
Wilmington Surgcare (Expansion)  
High Density Development**

Dear Ms. Taylor:

The City of Wilmington Engineering Division has received a request for a revision to the Stormwater Management Permit for Wilmington Surgcare. 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:

- Property Owner/Organization Revision

Please be aware all terms and conditions of the permit Issued on July 21, 2010 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.

An electronic copy of the approved 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.

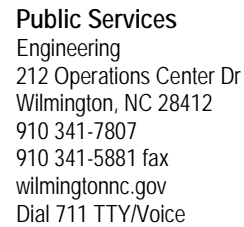
Sincerely,

*Richard Christensen*

for Anthony Caudle, City Manager  
City of Wilmington

cc: James Shafer, Wilmington Surgcare, L.P.  
Richard Collier, PE, McKim & Creed  
Brian Chambers, Senior Planner, City of Wilmington

*By waltonj at 3:53 pm, Jul 26, 2021*



If any of these permits have already been acquired please provide the Project Name, Project/Permit Number, issue date and the type of each permit:

### III. CONTACT INFORMATION

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

Applicant / Organization: Wilmington Surgcare, L.P.

Signing Official & Title: James Shafer, Administrator

- a. Contact information for Applicant / Signing Official:

Street Address: 1801 S. 17th Street

City: Wilmington State: NC Zip: 28401

Phone: 910-763-4555 Fax: 910-332-8920 Email: jshafer@surgerypartners.com

Mailing Address (if different than physical address): \_\_\_\_\_

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

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

The property owner (Skip to item 3)

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

Purchaser\* (Attach a copy of the pending sales agreement and complete items 2 and 2a below)

Developer\* (Complete items 2 and 2a below.)

2. Print Property Owner's name and title below, if you are the lessee, purchaser, or developer. (This is the person who owns the property that the project is on.)

Property Owner / Organization: Flagship Wilmington SurgCare, LLC c/o Flagship Healthcare Properties

Signing Official & Title: Polly Taylor, Senior Vice President

- a. Contact information for Property Owner:

Street Address: 2701 Coltsgate Road, Suite 300

City: Charlotte State: NC Zip: 28211

Phone: 704-442-0222 Fax: \_\_\_\_\_ Email: polly@flagshiphp.com

Mailing Address (if different than physical address): \_\_\_\_\_

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

3. (Optional) Print the name and title of another contact such as the project's construction supervisor or another person who can answer questions about the project:

Other Contact Person / Organization: Richard Collier/ McKim and Creed, Inc.

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

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

Street Address: 243 N. Front St

City: Wilmington State: NC Zip: 28401

Phone: 910-343-1048 Fax: \_\_\_\_\_ Email: rcollier@mckimcreed.com

Mailing Address (if different than physical address): \_\_\_\_\_

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

#### IV. PROJECT INFORMATION

1. In the space provided below, briefly summarize how the stormwater runoff will be treated.

The stormwater runoff will be treated utilizing an existing wet retaining pond onsite in the southern portion of the property as well as an existing infiltration basin in the northeast quadrant of the site.

2. Total Property Area: 256,568 square feet

3. Total Coastal Wetlands Area: 0 square feet

4. Total Surface Water Area: 0 square feet

5. Total Property Area (2) – Total Coastal Wetlands Area (3) – Total Surface Water Area (4) = Total Project Area: 256,568 square feet.

6. Existing Impervious Surface within Property Area: 84,002 square feet

7. Existing Impervious Surface to be Removed/Demolished: 8,893 square feet

8. Existing Impervious Surface to Remain: 75,109 square feet

9. Total Onsite (within property boundary) Newly Constructed Impervious Surface (*in square feet*):

Buildings/Lots	8,996
Impervious Pavement	12,126
Pervious Pavement (adj. total, with % credit applied)	0
Impervious Sidewalks	982
Pervious Sidewalks (adj. total, with % credit applied)	0
Other (describe) generator/transformer	226
Future Development	0
<b>Total Onsite Newly Constructed Impervious Surface</b>	<b>22,330</b>

10. Total Onsite Impervious Surface

(Existing Impervious Surface to remain + Onsite Newly Constructed Impervious Surface) = 97,439 square feet

11. Project percent of impervious area: (Total Onsite Impervious Surface / Total Project Area) x100 = 38.0 %

12. Total Offsite Newly Constructed Impervious Area (improvements made outside of property boundary, in square feet):

Impervious Pavement	10,536
Pervious Pavement (adj. total, with % credit applied)	0
Impervious Sidewalks	0
Pervious Sidewalks (adj. total, with % credit applied)	0
Other (describe)	0
<b>Total Offsite Newly Constructed Impervious Surface</b>	<b>10,536</b>

13. Total Newly Constructed Impervious Surface

(Total Onsite + Offsite Newly Constructed Impervious Surface) = 32,866 square feet

14. Complete the following information for each Stormwater BMP drainage area. If there are more than three drainage areas in the project, attach an additional sheet with the information for each area provided in the same format as below. Low Density projects may omit this section and skip to Section V.

Basin Information	WET POND BMP # 1	IB -1 BMP # 2	TOTAL SITE
Receiving Stream Name	Jumping Run Creek	Jumping Run Creek	Jumping Run Creek
Receiving Stream Index Number	18-76-13	18-76-13	18-76-13
Stream Classification	C; SW	C; SW	C; SW
Total Drainage Area (sf)	255,162	13,446	268,608
On-Site Drainage Area (sf)	238,556	13,446	251,980
Off-Site Drainage Area (sf)	16,606	0	16,606
<b>Total Impervious Area (sf)</b>	<b>100,536</b>	<b>7,439</b>	<b>107,975</b>
Buildings/Lots (sf)	8,996	0	8,996
Impervious Pavement (sf)	12,126	0	12,126
Pervious Pavement (sf)	0	0	0
Impervious Sidewalks (sf)	982	0	982
Pervious Sidewalks (sf)	0	0	0
Other (sf)	226	0	226
Future Development (sf)	0	0	0
Existing Impervious to remain (sf)	67,670	7,439	75,109
Offsite (sf)	10,536	0	10,536
Percent Impervious Area (%)	39.4%	55.3%	40.2%

15. How was the off-site impervious area listed above determined? Provide documentation:

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The proposed driveway for CFCC will be treated by the wet pond on-site.

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## V. SUBMITTAL REQUIREMENTS

1. Supplemental and Operation & Maintenance Forms - One applicable City of Wilmington Stormwater BMP supplement form and checklist must be submitted for **each** BMP specified for this project. One applicable proposed operation and maintenance (O&M) form must be submitted for **each type** of stormwater BMP. Once approved, the operation and maintenance forms must be referenced on the final plat and recorded with the register of deeds office.
2. Deed Restrictions and Restrictive Covenants - For all subdivisions, outparcels, and future development, the appropriate property restrictions and protective covenants are required to be recorded prior to the sale of any lot. Due to variability in lot sizes or the proposed BUA allocations, a table listing each lot number, lot size, and the allowable built-upon area must be provided as an attachment to the completed and notarized deed restriction form. The appropriate deed restrictions and protective covenants forms can be downloaded at the link listed in section V (3). Download the latest versions for each submittal.

In instances where the applicant is different than the property owner, it is the responsibility of the property owner to sign the deed restrictions and protective covenants form while the applicant is responsible for ensuring that the deed restrictions are recorded.

**By the notarized signature(s) below, the permit holder(s) certify that the recorded property restrictions and protective covenants for this project, if required, shall include all the items required in the permit and listed on the forms available on the website, that the covenants will be binding on all parties and persons claiming under them, that they will run with the land, that the required covenants cannot be changed or deleted without concurrence from the City of Wilmington, and that they will be recorded prior to the sale of any lot.**

3. Only complete application packages will be accepted and reviewed by the City. A complete package includes all of the items listed on the City Engineering Plan Review Checklist, including the fee. Copies of the Engineering Plan Review Checklist, all Forms, Deed Restrictions as well as detailed instructions on how to complete this application form may be downloaded from:

<http://www.wilmingtonnc.gov/PublicServices/Engineering/PlanReview/StormwaterPermits.aspx>

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

## VI. CONSULTANT INFORMATION AND AUTHORIZATION

1. Applicant: 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: Richard M. Collier, PE

Consulting Firm: McKim & Creed, Inc.

- a. Contact information for consultant listed above:

Mailing Address: 243 N. Front Street

City: Wilmington State: NC Zip: 28401

Phone: 910-343-1048 Fax: 910-251-8282 Email: rcollier@mckimcreed.com

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

I, (print or type name of person listed in Contact Information, item 2) Polly Taylor, certify that I own the property identified in this permit application, and thus give permission to (print or type name of person listed in Contact Information, item 1) James Shafer with (print or type name of organization listed in Contact Information, item 1) Wilmington Suracore, LP 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 (entity listed in Contact Information, item 1) 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.

SEAL

Gaby Oliva Cornejo  
**NOTARY PUBLIC**  
Cabarrus County, North Carolina  
My Commission Expires: 07/15/2026

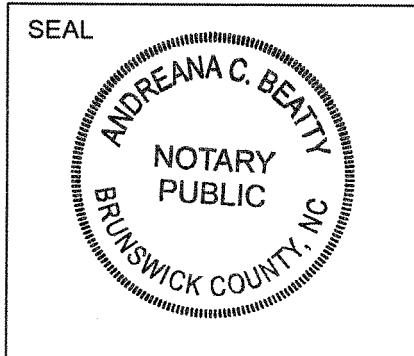
Signature: Polly Taylor

Date: 10/29/2021

I, Gaby Oliva Cornejo, a Notary Public for the State of North Carolina, County of Cabarrus, do hereby certify that Polly A. Taylor personally appeared before me this day of 28th Oct., 2021

**VIII. APPLICANT'S CERTIFICATION**

I, (print or type name of person listed in Contact Information, item 1) James Shafer 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 stormwater rules under.



Signature: *James M. Shafer*  
Date: 8/25/21

I, Andreana C. Beatty, a Notary Public for the State of North Carolina, County of Brunswick, do hereby certify that James Shafer personally appeared before me this day of August 25, 2021, and acknowledge the due execution of the application for a stormwater

permit. Witness my hand and official seal,

*Andreana C. Beatty*  
My commission expires: April 27, 2025

STORMWATER MANAGEMENT PERMIT APPLICATION FORM  
401 CERTIFICATION APPLICATION FORM  
**WET DETENTION BASIN SUPPLEMENT**

*This form must be filled out, printed and submitted.*

*The Required Items Checklist (Part III) must be printed, filled out and submitted along with all of the required information.*

**I. PROJECT INFORMATION**

Project name	Wilmington Surgcare Expansion
Contact person	Richard Collier, PE
Phone number	910-343-1048
Date	20-Jul-21
Drainage area number	1

**II. DESIGN INFORMATION**
**Site Characteristics**

Drainage area	255,140 ft <sup>2</sup>
Impervious area, post-development	100,624 ft <sup>2</sup>
% impervious	39.44 %
Design rainfall depth	1.0 in

**Storage Volume: Non-SA Waters**

Minimum volume required	7,594 ft <sup>3</sup>	Insufficient required volume.
Volume provided	15,135 ft <sup>3</sup>	OK, volume provided is equal to or in excess of volume required.

**Storage Volume: SA Waters**

1.5" runoff volume	ft <sup>3</sup>
Pre-development 1-yr, 24-hr runoff	ft <sup>3</sup>
Post-development 1-yr, 24-hr runoff	ft <sup>3</sup>
Minimum volume required	ft <sup>3</sup>
Volume provided	ft <sup>3</sup>

**Peak Flow Calculations**

Is the pre/post control of the 1yr 24hr storm peak flow required?	N	(Y or N)
1-yr, 24-hr rainfall depth	in	NEW HANOVER COUNTY
Rational C, pre-development	(unitless)	
Rational C, post-development	(unitless)	
Rainfall intensity: 1-yr, 24-hr storm	in/hr	
Pre-development 1-yr, 24-hr peak flow	4.53 ft <sup>3</sup> /sec	
Post-development 1-yr, 24-hr peak flow	9.64 ft <sup>3</sup> /sec	
Pre/Post 1-yr, 24-hr peak flow control	5.11 ft <sup>3</sup> /sec	

**Elevations**

Temporary pool elevation	17.00 fmsl	
Permanent pool elevation	14.88 fmsl	
SHWT elevation (approx. at the perm. pool elevation)	fmsl	
Top of 10ft vegetated shelf elevation	N/A fmsl	
Bottom of 10ft vegetated shelf elevation	N/A fmsl	Data not needed for calculation option #1, but OK if provided.
Sediment cleanout, top elevation (bottom of pond)	10.00 fmsl	
Sediment cleanout, bottom elevation	9.00 fmsl	Data not needed for calculation option #1, but OK if provided.
Sediment storage provided	1.00 ft	
Is there additional volume stored above the state-required temp. pool?	N	(Y or N)
Elevation of the top of the additional volume	17.0 fmsl	OK

**II. DESIGN INFORMATION**
**Surface Areas**

Area, temporary pool	8,578	ft <sup>2</sup>	
Area REQUIRED, permanent pool	6,055	ft <sup>2</sup>	
SA/DA ratio	2.37	(unitless)	
Area PROVIDED, permanent pool, $A_{perm\_pool}$	6,087	ft <sup>2</sup>	OK
Area, bottom of 10ft vegetated shelf, $A_{bot\_shelf}$		ft <sup>2</sup>	
Area, sediment cleanout, top elevation (bottom of pond), $A_{bot\_pond}$	1,356	ft <sup>2</sup>	

**Volumes**

Volume, temporary pool	15,135	ft <sup>3</sup>	OK
Volume, permanent pool, $V_{perm\_pool}$	15,727	ft <sup>3</sup>	
Volume, forebay (sum of forebays if more than one forebay)	721	ft <sup>3</sup>	
Forebay % of permanent pool volume	4.6%	%	Insufficient forebay volume.

**SA/DA Table Data**

Design TSS removal	85	%	
Coastal SA/DA Table Used?	Y	(Y or N)	
Mountain/Piedmont SA/DA Table Used?	N	(Y or N)	
SA/DA ratio	2.37	(unitless)	

Average depth (used in SA/DA table):

Calculation option 1 used? (See Figure 10-2b)	Y	(Y or N)	
Volume, permanent pool, $V_{perm\_pool}$	15,727	ft <sup>3</sup>	
Area provided, permanent pool, $A_{perm\_pool}$	5,465	ft <sup>2</sup>	
Average depth calculated	3.62	ft	OK
Average depth used in SA/DA, $d_{av}$ , (Round to nearest 0.5ft)	3.6	ft	OK

Calculation option 2 used? (See Figure 10-2b)

Area provided, permanent pool, $A_{perm\_pool}$	6,087	ft <sup>2</sup>	
Area, bottom of 10ft vegetated shelf, $A_{bot\_shelf}$		ft <sup>2</sup>	

 Area, sediment cleanout, top elevation (bottom of pond),  $A_{bot\_pond}$ 

"Depth" (distance b/w bottom of 10ft shelf and top of sediment)		ft	
Average depth calculated		ft	
Average depth used in SA/DA, $d_{av}$ , (Round to nearest 0.5ft)		ft	

**Drawdown Calculations**

Drawdown through orifice?	Y	(Y or N)	
Diameter of orifice (if circular)	1.00	in	
Area of orifice (if non-circular)		in <sup>2</sup>	
Coefficient of discharge ( $C_D$ )	0.60	(unitless)	
Driving head ( $H_o$ )	2.16	ft	
Drawdown through weir?	N	(Y or N)	
Weir type		(unitless)	
Coefficient of discharge ( $C_w$ )		(unitless)	
Length of weir (L)		ft	
Driving head (H)		ft	
Pre-development 1-yr, 24-hr peak flow	4.53	ft <sup>3</sup> /sec	
Post-development 1-yr, 24-hr peak flow	9.64	ft <sup>3</sup> /sec	
Storage volume discharge rate (through discharge orifice or weir)	0.02	ft <sup>3</sup> /sec	
Storage volume drawdown time	3.94	days	OK, draws down in 2-5 days.

**Additional Information**

Vegetated side slopes	3	:1	OK
Vegetated shelf slope		:1	
Vegetated shelf width		ft	
Length of flowpath to width ratio	3	:1	OK
Length to width ratio	2.0	:1	OK
Trash rack for overflow & orifice?	Y	(Y or N)	OK
Freeboard provided	1.0	ft	OK
Vegetated filter provided?	N	(Y or N)	Insufficient. Vegetated filter required.
Recorded drainage easement provided?		(Y or N)	
Capures all runoff at ultimate build-out?	Y	(Y or N)	OK
Drain mechanism for maintenance or emergencies is:	Gate Valve / Pump		

STORMWATER MANAGEMENT PERMIT APPLICATION FORM  
401 CERTIFICATION APPLICATION FORM

**INFILTRATION BASIN SUPPLEMENT**

*This form must be filled out, printed and submitted.*

*The Required Items Checklist (Part III) must be printed, filled out and submitted along with all of the required information.*

**I. PROJECT INFORMATION**

Project Name	Wilmington Surgcare Expansion
Contact Person	Richard Collier, PE
Phone Number	910-343-1048
Date	8-Jan-20
Drainage Area Number	2

**II. DESIGN INFORMATION**

**Site Characteristics**

Drainage area	13,446.00	ft <sup>2</sup>
Impervious area	7,439.00	ft <sup>2</sup>
Percent impervious	0.55	%
Design rainfall depth	1.50	in

**Peak Flow Calculations**

1-yr, 24-hr rainfall depth	3.80	in
1-yr, 24-hr intensity		in/hr
Pre-development 1-yr, 24-hr discharge	0.26	ft <sup>3</sup> /sec
Post-development 1-yr, 24-hr discharge	0.88	ft <sup>3</sup> /sec
Pre/Post 1-yr, 24-hr peak flow control	0.62	ft <sup>3</sup> /sec

**Storage Volume: Non-SA Waters**

Minimum design volume required	921.00	ft <sup>3</sup>
Design volume provided	926.00	ft <sup>3</sup>

OK for non-SA waters

**Storage Volume: SA Waters**

1.5" runoff volume		ft <sup>3</sup>
Pre-development 1-yr, 24-hr runoff volume		ft <sup>3</sup>
Post-development 1-yr, 24-hr runoff volume		ft <sup>3</sup>
Minimum required volume		ft <sup>3</sup>
Volume provided		ft <sup>3</sup>

**Soils Report Summary**

Soil type	Seagate	
Infiltration rate	6.60	in/hr
SHWT elevation	23.50	fmsl

**Basin Design Parameters**

Drawdown time	0.36	days	OK
Basin side slopes	3.00	:1	OK
Basin bottom elevation	25.50	fmsl	OK
Storage elevation	26.50	fmsl	
Storage Surface Area	1,420.00	ft <sup>2</sup>	
Top elevation	27.00	fmsl	

**Basin Bottom Dimensions**

Basin length	90.00	ft
Basin width	10.00	ft
Bottom Surface Area	900.00	ft <sup>2</sup>

**Additional Information**

Maximum runoff to each inlet to the basin?	0.50	ac-in	OK
Length of vegetative filter for overflow	50.00	ft	OK
Distance to structure	155.00	ft	OK
Distance from surface waters	n/a	ft	OK
Distance from water supply well(s)	n/a	ft	OK
Separation from impervious soil layer	n/a	ft	OK
Naturally occurring soil above shwt	2.00	ft	OK
Bottom covered with 4-in of clean sand?	y	(Y or N)	OK
Proposed drainage easement provided?	y	(Y or N)	OK
Captures all runoff at ultimate build-out?	y	(Y or N)	OK
Bypass provided for larger storms?	y	(Y or N)	OK
Pretreatment device provided			

## Wet Detention Basin Operation and Maintenance Agreement

I will keep a maintenance record on this BMP. This maintenance record will be kept in a log in a known set location. Any deficient BMP 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 removal efficiency of the BMP.

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.

**This system (check one):**

☒ does ☐ does not incorporate pretreatment other than a forebay.

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.

BMP element:	Potential problem:	How I will remediate the problem:
The entire BMP	Trash/debris is present.	Remove the trash/debris.
The side slopes of the wet detention basin	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 long.	Maintain vegetation at a height of approximately six inches.

Permit Number: \_\_\_\_\_  
 (to be provided by City of Wilmington)  
 BMP Drainage Basin #: \_\_\_\_\_

BMP element:	Potential problem:	How I will remediate the problem:
<b>The inlet device: pipe or swale</b>	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.
<b>The forebay</b>	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 BMP.
	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.
<b>The vegetated shelf</b>	Best professional practices show that pruning is needed to maintain optimal plant health.	Prune according to best professional practices
	The plant community and coverage is significantly (>25%) different from approved landscape plan.	Restore plant vegetation to approved condition. If landscape plan needs to be adjusted to specify vegetation more appropriate for site conditions, contact City Stormwater or Engineering Staff.
	Cattails or other invasive plants cover >25% of the veg't shelf. A monoculture of plants must be avoided)	Remove all invasives by physical removal or by wiping them with pesticide (do not spray) – consult a professional.
	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.
<b>The main treatment area</b>	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 BMP.

Permit Number: \_\_\_\_\_  
 (to be provided by City of Wilmington)  
 BMP Drainage Basin #: \_\_\_\_\_

BMP element:	Potential problem:	How I will remediate the problem:
<b>The main treatment area (continued)</b>	Algal growth covers over 25% of the area.	Consult a professional to remove and control the algal growth.
	Cattails or other invasive plants cover >25% of the veg't shelf. A monoculture of plants must be avoided)	Remove all invasives by physical removal or by wiping them with pesticide (do not spray) – consult a professional.
<b>The embankment</b>	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.
<b>The outlet device</b>	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.
<b>The receiving water</b>	Erosion or other signs of damage have occurred at the outlet.	Contact the local NC Division of Water Quality Regional Office, or the 401 Oversight Unit at 919-733-1786.

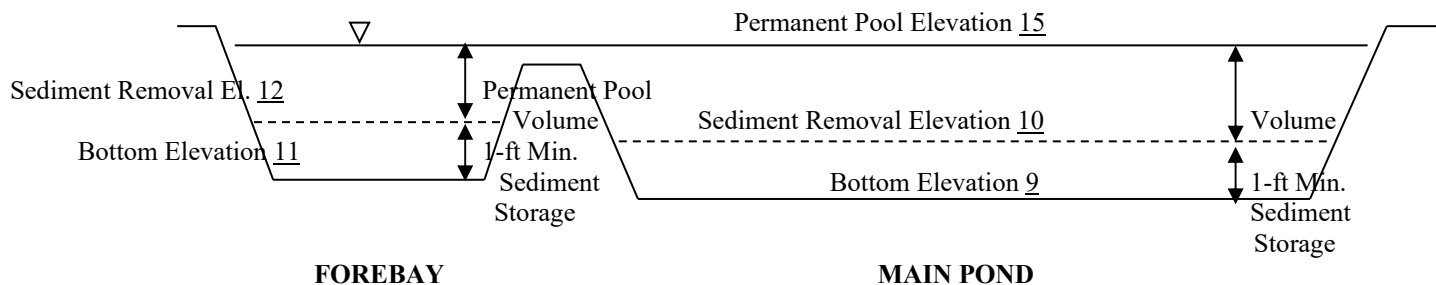
The measuring device used to determine the sediment elevation shall be such that it will give an accurate depth reading and not readily penetrate into accumulated sediments.

When the permanent pool depth reads 3 feet in the main pond, the sediment shall be removed.

When the permanent pool depth reads 3 feet in the forebay, the sediment shall be removed.

### BASIN DIAGRAM

(fill in the blanks)



Permit Number: \_\_\_\_\_  
(to be provided 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: Wilmington Surgcare Expansion

BMP drainage basin number: 1

Print name: James Shafer

Title: Administrator

Address: 1801 S. 17<sup>th</sup> Street

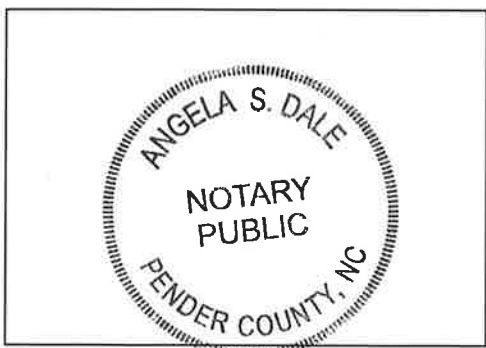
Phone: 910-763-4555

Signature: James M. Shafer

Date: 1/29/2020

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.

I, Angela S Dale, a Notary Public for the State of North Carolina, County of New Hanover, do hereby certify that James M Shafer personally appeared before me this 24<sup>th</sup> day of January, 2020, and acknowledge the due execution of the forgoing wet detention basin maintenance requirements. Witness my hand and official seal,



SEAL

My commission expires June 28, 2022

## Infiltration Basin Operation and Maintenance Agreement

I will keep a maintenance record on this BMP. This maintenance record will be kept in a log in a known set location. Any deficient BMP 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 removal efficiency of the BMP.

Important maintenance procedures:

- The drainage area will be carefully managed to reduce the sediment load to the infiltration basin.
- Immediately after the infiltration basin is established, the vegetation will be watered twice weekly if needed until the plants become established (commonly six weeks).
- No portion of the infiltration basin will be fertilized after the initial fertilization that is required to establish the vegetation.
- The vegetation in and around the basin will be maintained at a height of approximately six inches.

After the infiltration basin is established, it will be inspected **once a quarter and within 24 hours after every storm event greater than 1.5 inches**. Records of operation and maintenance will be kept in a known set location and will be available upon request.

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

BMP element:	Potential problem:	How I will remediate the problem:
The entire BMP	Trash/debris is present.	Remove the trash/debris.
The perimeter of the infiltration basin	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.
The inlet device: pipe or swale	The pipe is clogged (if applicable).	Unclog the pipe. Dispose of the sediment off-site.
	The pipe is cracked or otherwise damaged (if applicable).	Replace the pipe.
	Erosion is occurring in the swale (if applicable).	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.

<b>BMP element:</b>	<b>Potential problem:</b>	<b>How I will remediate the problem:</b>
<b>The forebay</b>	Sediment has accumulated and reduced the depth to 75% of the original design 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 BMP.
	Erosion has occurred or riprap is displaced.	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 pesticides are used, wipe them on the plants rather than spraying.
<b>The main treatment area</b>	A visible layer of sediment has accumulated.	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 BMP. Replace any media that was removed in the process. Revegetate disturbed areas immediately.
	Water is standing more than 5 days after a storm event.	Replace the top few inches of filter media and see if this corrects the standing water problem. If so, revegetate immediately. If not, consult an appropriate professional for a more extensive repair.
	Weeds and noxious plants are growing in the main treatment area.	Remove the plants by hand or by wiping them with pesticide (do not spray).
<b>The embankment</b>	Shrubs or trees have started to grow on the embankment.	Remove shrubs or trees immediately.
	An annual inspection by an appropriate professional shows that the embankment needs repair.	Make all needed repairs.
<b>The outlet device</b>	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.
<b>The receiving water</b>	Erosion or other signs of damage have occurred at the outlet.	Contact the NC Division of Water Quality 401 Oversight Unit at 919-733-1786.

Permit Number: \_\_\_\_\_  
(to be provided 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: Wilmington Surgcare

Expansion \_\_\_\_\_

BMP drainage basin number: 2

Print name: James Shafer

Title: Administrator

Address: 1801 S. 17<sup>th</sup> Street

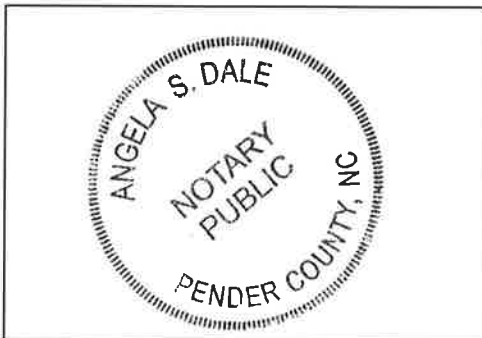
Phone: 910-763-4555

Signature: James M. Shafer

Date: 1/24/2020

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.

I, Angela S. Dale, a Notary Public for the State of North Carolina, County of New Hanover, do hereby certify that James M. Shafer personally appeared before me this 24<sup>th</sup> day of January, 2020, and acknowledge the due execution of the forgoing infiltration basin maintenance requirements. Witness my hand and official seal,



SEAL

My commission expires June 28, 2022

Permit Number: \_\_\_\_\_  
(to be provided by City of Wilmington)



#### Public Services

Engineering  
414 Chestnut St, Suite 200  
Wilmington, NC 28401  
910 341-7807  
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Dial 711 TTY/Voice

July 21, 2010

Mr James Shafer, Administrator  
Wilmington Surgery Center, L.P.  
1801 South 17<sup>th</sup> Street  
Wilmington, NC 28401

**Subject: Stormwater Management Permit No. 2010014  
Wilmington SurgCare  
High Density Development**

Dear Mr. Shafer:

The City of Wilmington Engineering Department has received a complete Stormwater Management Permit application for The Wilmington SurgCare facility. Having reviewed the application and all supporting materials, the City of Wilmington has determined that the proposed development meets the requirements of the City of Wilmington's Comprehensive Stormwater Ordinance. We are forwarding the Stormwater Management Permit for the construction, operation and maintenance of the subject project and stormwater management system.

This permit shall be effective from the date of issuance until July 16, 2020, and shall be subject to the conditions and limitations specified therein. Please pay special attention to the following permit conditions:

- Condition 12 - All applicable operation and maintenance agreements must be recorded with the register of deeds prior to intended use or final inspection.
- Condition 15 - Operation and Maintenance responsibilities. Failure to establish an adequate system for inspection and maintenance of the stormwater management system will result in future compliance problems.
- Condition 17 - As built and certification requirements. All items must be completed prior to intended use or final inspection.

The City of Wilmington is now the designated coastal stormwater permitting and enforcement authority for projects within the Wilmington City limits. All components of the stormwater management system currently covered by State Stormwater Permit No. SW8961212 have been incorporated into the stormwater management application package for this approval. The Stormwater Management system for the entire site is now covered by Permit No. 2010014 and any future development activities will be subject to the requirements of the Wilmington Comprehensive Stormwater Ordinance. It is recommended that you contact the North Carolina Department of Environment and Natural Resources - Division of Water Quality at the address below to request rescission of Stormwater Permit No. SW8 961212. The project will be subject to all NCDENR - DWQ rescission requirements, terms and conditions.

NCDENR - Division of Water Quality  
Wilmington Regional Office  
127 Cardinal Drive Extension  
Wilmington, NC 28405  
(910) 796-7215



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The stamped, approved stormwater management drawing set will be released for construction by the Wilmington Planning Division under separate cover. **The plan sheets approved previously as part of Wilmington Stormwater Discharge Permit Numbers 1997002 & 1997058 are attached for reference. Please add these sheets to the approved drawing set for Wilmington Stormwater Management Permit No. 2010014.** An electronic copy of the entire 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 Robert Gordon at (910) 341-5856 or [rob.gordon@wilmingtonnc.gov](mailto:rob.gordon@wilmingtonnc.gov)

Sincerely,

A handwritten signature in black ink, appearing to read "Robert D. Gordon".

for Sterling Cheatham, City Manager  
City of Wilmington

cc: Nick Lauretta, PE, McKim & Creed, PA  
Dawn Snotherly, Wilmington Development Services/Planning



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# COMPREHENSIVE STORMWATER MANAGEMENT PERMIT

## HIGH DENSITY DEVELOPMENT

### SECTION 1 – APPROVAL

Having reviewed the application and all supporting materials, the City of Wilmington has determined that the application is complete and the proposed development meets the requirements of the City of Wilmington's Comprehensive Stormwater Ordinance.

PERMIT HOLDER: **Wilmington Surgery Center, L.P.**  
PROJECT: **Wilmington SurgCare**  
ADDRESS: **1801 South 17<sup>th</sup> St., Wilmington**  
PERMIT #: **2010014**

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 July 16, 2020 and shall be subject to the following specified conditions and limitations:

### Section 2 - CONDITIONS

1. This approval is valid for the stormwater management system as proposed on the approved stormwater management plans for the Wilmington SurgCare Parking Lot Expansion dated July 16, 2010. The wet detention pond system previously approved by Wilmington Stormwater Discharge Permit Numbers 1997002 & 1997058 is incorporated by reference and is enforceable component of this permit.
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 application package for the approved stormwater permit, 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, including information provided in the application and supplements.
4. The runoff from all built-upon area within any permitted drainage area must be directed into the permitted stormwater control system for that drainage area.
5. The following design criteria have been provided for the wet detention pond and must be maintained at design condition:

a. Drainage area* (ft <sup>2</sup> ):	474,881
b. Total impervious surfaces* (ft <sup>2</sup> ):	78,994
c. Design Storm (inches):	1
d. Pond Design Depth (feet):	6
e. TSS removal efficiency (%):	90
f. Permanent Pool Elev. (FMSL):	15
g. Permanent Pool Surface Area (ft <sup>2</sup> ):	5,937



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h. Permitted Storage Volume (ft <sup>3</sup> ):	14,166(at temporary pool)
i. Temporary Storage Elevation (FMSL):	17
j. Controlling Orifice:	1 5/8" Ø pipe
k. Permitted Forebay Surface Area (ft <sup>2</sup> ):	645
l. Permitted Forebay Volume (ft <sup>3</sup> ):	847
m. Grassed Swale Pretreatment (linear ft):	225
n. Fountain Horsepower (HP):	N/A
o. Received Stream:	Jumping Run Br./Greenfield Lake
p. River Basin:	Cape Fear River Basin
q. Stream Index Number:	18-76-1-3
r. Classification of Waterbody:	"C; Sw"

\* Does not include Infiltration basin data

6. 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 or to the drainage area.
  - c. Further subdivision, acquisition, lease or sale of any part of the project area.
  - d. Filling in, altering, or piping of any vegetative conveyance shown on the approved plan.
  - e. Construction of any permitted future areas shown on the approved plans.
7. A copy of the approved plans and specifications shall be maintained on file by the Permittee.
8. During construction, erosion shall be kept to a minimum and any eroded areas of the system will be repaired immediately.
9. If the stormwater system was used as an Erosion Control device, it must be restored to design condition prior to operation as a stormwater treatment device, and prior to issuance of any certificate of occupancy for the project.
10. 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.
11. All stormwater treatment systems as well as access to nearest right-of-way must be located in recorded easements.
12. All applicable operation & maintenance agreements and easements pertaining to each stormwater treatment system shall be referenced on the final plat and recorded with the Register of Deeds upon final plat approval. If no plat is recorded for the site the operation and maintenance agreements and easements shall be recorded with the Register of Deeds so as to appear in the chain of title of all subsequent purchasers under generally accepted searching standards.



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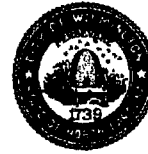
13. The stormwater management system shall be constructed in its entirety, vegetated and operational for its intended use prior to the construction of any built-upon surface unless prior approval is obtained. City Staff must be notified of any deviation prior to construction of the built-upon surface. Any deviation request shall include justification and must propose an alternative timeline or construction sequence. Notification shall not constitute approval. Any alternative timeline approved by City staff shall become an enforceable component of this permit.
14. Each component of the stormwater management system should be inspected once a month and within 24 hours after every storm event greater than 1.5 inches. Records of inspection should be kept by the permittee in a known set location and made available upon request to authorized personnel of the City of Wilmington.
15. The permittee shall at all times provide the operation and maintenance necessary to assure the permitted stormwater system remains in accordance with the approved stormwater management plans and functions at optimum efficiency. The approved Operation and Maintenance Plan must be followed in its entirety and maintenance must occur at the scheduled intervals including, but not limited to:
  - a. Scheduled inspections.
  - b. Sediment removal.
  - c. Mowing and revegetation of slopes and the vegetated areas.
  - d. Maintenance of landscape plants, including those within the landscape buffer and on the vegetated shelf.
  - e. Immediate repair of eroded areas.
  - f. Maintenance of all slopes in accordance with approved plans and specifications.
  - g. Debris removal and unclogging of outlet structure, orifice device, flow spreader, catch basins and piping.
  - h. Access to the outlet structure must be available at all times.
16. Records of inspection, maintenance and repair for the permitted stormwater system must be kept by the permittee for at least 5 years from the date of record and made available upon request to authorized personnel of the City of Wilmington. The records will indicate the date, activity, name of person performing the work and what actions were taken.
17. Upon completion of construction, before a final inspection shall be granted, and prior to use or 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 final design specifications and the field location, type, depth, invert and planted vegetation of all measures, controls and devices, as-installed. A certification shall be submitted, along with all supporting documentation that specifies, under seal that the as-built stormwater measures are in compliance with the approved stormwater management plans. A final inspection by City of Wilmington personnel will be required prior to use or operation of the permitted facility.



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18. 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.
19. 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 and any other applicable section of the Land Development Code.
20. 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.
21. 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.
22. 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.
23. 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.
24. 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.
25. 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.
26. The permittee shall submit a renewal request with all required forms and documentation at least 180 days prior to the expiration date of this permit.



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27. 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 16th day of July, 2010

A handwritten signature in black ink, appearing to read 'Sterling Cheatham', written over a horizontal line.

for Sterling Cheatham, City Manager  
City of Wilmington