

**INFRASTRUCTURE PLAN &
PLAN REVISION
(Linear Projects)

APPLICATION**



January 1, 2016

Beginning July 1, 2012, per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until **June 18, 2017.**

Stafford County Department of Planning & Zoning

**1300 Courthouse Road
P O Box 339
Stafford, Virginia 22555-0339**

**PHONE: 540-658-8668
FAX: 540-658-6824**

www.staffordcountyva.gov

Infrastructure Plan Process

Per Stafford County Code, Section 28-245 of the Zoning Ordinance an infrastructure plan consists of: Linear projects, but are not limited to pump stations, roads, sidewalks, trails and stormwater management facilities

1. Once a complete application has been submitted to the CDSC/Permit Center, the application and fees are verified, logged and a project number is assigned.
2. The plan is initially reviewed by all appropriate county and state agencies/departments. All county departments plan review and comments can be viewed on the Integrated Web Response System (IWR) at <http://hello.stafford.va.us>.
3. The Engineer/Applicant addresses all outstanding comments. Resubmit plans for every outstanding review plus one for file for 2nd review. Changes to plans shall be resubmitted within 120 days of last County comments received per ordinance 28-251 and include a comment response letter.
4. The plan preparer has two reviews to address all County comments. If comments are not addressed, a 3rd review fee will be required prior to plat resubmission.
5. After staff has determined that all comments are addressed, submit eight (8) copies for final signature.
6. Approved copies shall be picked up by the applicant, and remaining copies are distributed by staff to appropriate agencies.
7. Applicant applies for building/occupancy permits in the Department of Public Works (Phone # 540-658-8650).

Application Submittal Checklist

- Completed **“Project Information and Primary Contacts”** form.
- Completed **“Detailed Project Description”** form with description of project: *Example:* Description & Location of Project: Final Subd Plat for 31 lots, on a min of 3 acres served by well and septic, located south of Smith St and approx. 1,000 ft east of Jones Dr.
- Completed **“Infrastructure Plan Fee Calculation”** form and appropriate fees payable to the **“County of Stafford” including 2.75% TECHNOLOGY FEE**
- Signed **“Statements of Understanding”** from the owner(s) and applicant
- Completed **“Certificate of Notice to Adjoining Property Owners”**
- Completed **“Infrastructure Plans Checklist”**, signed by the engineer who prepared the plan
- “Certified Mail Receipts”** of adjacent property owner’s letters per Section 28-250 of the Zoning Ordinance
- Twelve (12) sets of 24” x 36” plans
- All County Projects require a journal entry form at time of plan submission

This application type is not subject to TRC review.

RECEIVED: DATE: _____ INITIALS _____	OFFICIALLY SUBMITTED: DATE: _____ INITIALS _____
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Project Information & Primary Contacts
Infrastructure

<u>PROJECT INFORMATION</u>		<u>PROJECT #</u> _____
_____		_____
PROJECT NAME		SECTION
_____		_____
ADDRESS (IF AVAILABLE)		TOTAL SITE ACREAGE
_____	_____	_____
TAX MAP /PARCEL(S)	ELECTION DISTRICT	ZONING DISTRICT
DESCRIPTION AND LOCATION OF PROJECT:		

<u>APPLICANT/AGENT</u>		Primary Contact Person <input type="checkbox"/>	
_____		_____	
NAME		COMPANY	
_____		_____	
ADDRESS	CITY	STATE	ZIP
_____		_____	
PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS	

<u>OWNER (Provide attachments if multiple owners)</u>		Primary Contact Person <input type="checkbox"/>	
_____		_____	
NAME		COMPANY	
_____		_____	
ADDRESS	CITY	STATE	ZIP
_____		_____	
PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS	

<u>PROFESSIONAL (Engineer, Surveyor, etc.)</u>		Primary Contact Person <input type="checkbox"/>	
_____		_____	
NAME		COMPANY	
_____		_____	
ADDRESS	CITY	STATE	ZIP
_____		_____	
PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS	

Detailed Project Description

CLEARLY INDICATE ALL INFORMATION THAT APPLIES TO THIS PROJECT:

Is This Request Submitted In Conjunction With Another Application?

Application Number: _____

ADDITIONAL INFORMATION (if applicable)

- (1) _____ # of Gross Acres
- (2) _____ # of Impervious Acres
- (3) _____ # of Disturbed Acres
- (4) _____ # of Linear Feet
- (5) _____ # of Pumping Stations
- (6) _____ # of SWM Facilities

g. CHECK BOX IF REVISION

Revision

Are/were there any **CONDITIONS** associated with this application?

Please provide Project Application Number:

- | | | |
|------------------------------------|---------------------------------------|-----------------------------|
| Conditional Use Permit(s) | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |
| Resolution(s) | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |
| Rezoning(s) | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |
| Ordinance(s)/Proffers | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |
| Zoning Appeal(s), Variance(s) | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |
| Special Exception(s) | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |
| Waiver(s), Appeal(s), Exception(s) | <input type="checkbox"/> YES, # _____ | <input type="checkbox"/> NO |

INFRASTRUCTURE PLAN
Review Fee Calculation

*** Total application fee includes ONLY the 1st & 2nd Reviews

***Total application fee is for the administrative process and review of this application, and does not constitute an approval of the Infrastructure Plan.

Fee Calculation:

A. Base Fee	\$ <u>3,825.00</u>
B. Stormwater Management/E&S Review Fee	\$ <u>1,200.00</u>
C. Utilities Review Fee (if water and sewer) (\$600.00)	\$ <u>600.00</u>
D. Transportation Review Fee (if Road Construction) (\$400.00)	\$ <u>400.00</u>
SUBTOTAL	\$ <u>.00</u>

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017. + 2.75%

\$ _____
Do not round
GRAND TOTAL \$ _____

All 3rd and subsequent Review Fees are as follows:

Base Fee	(\$1,300.00)		
Planning & Zoning	(\$550.00)	Transportation	(\$160.00)
SWM / E&S	(\$600.00)	Utilities	(\$160.00)

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017.

THE ABOVE FEES ARE TO BE MADE PAYABLE TO: **COUNTY OF STAFFORD**

INFRASTRUCTURE PLAN
Review Fee Calculation
REVISIONS

MAJOR REVISION TO INFRASTRUCTURE PLAN

A. Infrastructure Plan REVISION Base Fee		\$ <u>4,500.00</u>
B. Utilities	(\$160.00)	\$ <u>.00</u>
C. Transportation	(\$160.00)	\$ <u>.00</u>
D. SWM	(\$600.00)	\$ <u>.00</u>
E. Fire	(\$125.00)	\$ <u>.00</u>
SUBTOTAL		\$ <u>.00</u>

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017. + 2.75% \$ _____

GRAND TOTAL \$ _____

MINOR REVISION TO INFRASTRUCTURE PLAN

A. Infrastructure Plan REVISION Base Fee		\$ <u>2,100.00</u>
B. Utilities	(\$160.00)	\$ <u>.00</u>
C. Transportation	(\$160.00)	\$ <u>.00</u>
D. SWM	(\$600.00)	\$ <u>.00</u>
E. Fire	(\$125.00)	\$ <u>.00</u>
SUBTOTAL		\$ <u>.00</u>

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017. + 2.75% \$ _____

GRAND TOTAL \$ _____

All 3rd and subsequent Review Fees are as follows:

Transportation	(\$160.00)	Utilities	(\$180.00)
SWM / E&S	(\$600.00)	Fire & Rescue	(\$125.00)

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017.

See Section 28-254 of the Zoning Ordinance for qualifications of any revision to an Infrastructure Plan.

Statements of Understanding

I, as owner/co owner of the property subject to this application, do hereby certify that I have read and understood the requirements for the submission of the infrastructure plans for review and approval as provided under the Code, and, further that this submittal is in compliance with the requirements and applicable provisions of the Subdivision Ordinance, Chapter 22 and Zoning Ordinance, Chapter 28 of the Stafford County Code.

Signature of Owner/Co Owner Printed Name Date

Signature of Owner/Co Owner Printed Name Date

Signature of Owner/Co Owner Printed Name Date

ENGINEERS CERTIFICATION OF PLAN COMPLETION:

I, as applicant or agent for the owner(s) of the property subject to this application, do hereby certify that I have read and understood the requirements for the submission of the infrastructure plans for review and approval as provided under the Stafford County Code, and, further that this submittal is in compliance with the requirements and applicable provisions of the Subdivision Ordinance, Chapter 22 and Zoning Ordinance, Chapter 28 of the Stafford County Code.

Signature of Applicant/Agent Printed Name Date

Certificate of Notice to Adjoining Property Owners

In accordance with the policies of the Stafford County Department of Planning and Zoning, attached are the postmarked certified mail receipts that will serve as proof of notification of the adjacent property owners.

Signature of Applicant/Agent

Printed Name

Date

Listed below are the names and addresses of the adjoining property owners notified.

Provide additional pages if needed.

_____	_____	
TAX MAP / PARCEL	NAME	

ADDRESS		

CITY	STATE	ZIP

_____	_____	
TAX MAP / PARCEL	NAME	

ADDRESS		

CITY	STATE	ZIP

_____	_____	
TAX MAP / PARCEL	NAME	

ADDRESS		

CITY	STATE	ZIP

Notification Letter to Adjoining Property Owners

Date

Dear _____,

This is to notify you that a Infrastructure Plan Application will be submitted for approval to the Stafford County Department of Planning and Zoning located at the Stafford County Administration Center, 1300 Courthouse Road, Stafford, VA 22555 on _____.

You may review the application at the above-mentioned address or call (540) 658-8668.

The following information is supplied for your convenience:

Name of Project: _____

Name of Applicant: _____

Address of Applicant: _____

Telephone #: _____

Name of Engineer: _____

Type of Use: _____

Specific Location: _____

Additional Information: _____

Sincerely,

Signature

Printed Name

Infrastructure Plan Checklist

This check list is to be completed, signed and certified by the plan preparer and shall be submitted as part of the application. Refer to the appropriate sections of the Stafford County Code of Ordinances and the DCSL.

N/A COMPLETE

Submission Requirements

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A NAME OF PROJECT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A ASSESSORS PARCEL # |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A DATE (INCL REVISIONS) |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A MAG.DIST/CNTY/STATE |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A NAME/ADDR OF APPLICNT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A NAME/ADDR OF OWNER |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.A NORTH INDICATOR ARROW |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.B SCALE (1"=50' OR >) |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.C # OF SHEETS OF PLAN |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.C INDICATE MATCH LINES |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.D OVERALL SHEET W/ PG INDICATORS |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.F SHEET SIZE (42" MAX) |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.F SPECIAL STUDIES AS REQ |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-248.G HORIZONTAL DIMENSIONS |

N/A COMPLETE

Contents of Site Development Plans

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 21.5.1.A SWM AGREEMENT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.1 LOCATION OF SITE |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.2 VIC MAP (1"=2,000') |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.2 NAMES / RT # RDS / SUBD / RR / ETC |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.2 MAGISTERIAL DISTRICT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.3 TOPO NOT > 5' |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.5 PROPOSED STREETS / ESMTS |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.6 PROPOSED UTILITIES |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.7 FLOODPLAINS / RPA |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.8 EXISTING ROADS / ESMTS / ETC |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.9 CURRENT ZONE |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.9 PROFFERS / CONDITIONS |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.B.10 NORTH ARROW |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.1 CERTIFICATE OF PLAN PREPARER |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.2 SIGN FIRE MARSHALL |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.2 SIGN FOR UTILITIES |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.2 SIGN LINE FOR E&S/STORMWATER MGMT ADMIN |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.2 SIGN LINE FOR VDOT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.2 SIGN LINE FOR AGENT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.3 ADJ OWNER NAMES |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.3 ADJ PROPERTY TAX MAP |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.3 ADJACENT USE |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.3 ADJACENT ZONING |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.3 ADJACENT PROP LOC |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.4 BLD DISTANCE FROM PROP LINE |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.4 BLDG_SETBACK LINES |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.6 RET WALL LOC/WIDTH/SIZE/HGT |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.7 EXISTING TOPOGRAPHY (2'INTRVLS) |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.7 PROP FINISH GRADE |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.10 NAME & RTE#/OR LR# OF ROW |
| <input type="checkbox"/> | <input type="checkbox"/> | 28-249.C.10 LR# OF EXISTING ESMTS |

N/A	COMPLETE	Contents of Site Development Plans Cont'd
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.10 MAINTENCE OF ESMT PUB/PVT
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.10 PURPOSE OF ESMTS
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.10 LOCATION/SIZE/WIDTH OF ESMT
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.13 LOC OF SEWER LINES
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.13 LOC/DIM OF UTILS
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.13 PT OF SEWR CONNECT
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.13 SANITARY SEWER FAC
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.14 HYDRANT LOCATIONS
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.14 WATER SYSTEMS
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.14 LOC OF WTR MNS/VALV
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.15 TYPE OF USE
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.16 TOTAL ACREAGE OF SITE
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.16 LOC&USE OF STRUCTURES
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.16 STRUCTURES DIM/SZ & HGT
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.18 PROPERTY ADDRESS ON BLDG FOOTPRINT
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.19 PROFFERS/IMPLEMENTATION PLAN
<input type="checkbox"/>	<input type="checkbox"/>	28-256.B ENG CRTFD COST EST
<input type="checkbox"/>	<input type="checkbox"/>	28-256.C.6 ESMT FOR DRAINAGE/UTILITIES
<input type="checkbox"/>	<input type="checkbox"/>	28-250.A MAIL RECEIPTS

N/A	COMPLETE	Streets and Sidewalks
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E STREET CLASSIFICATION
<input type="checkbox"/>	<input type="checkbox"/>	22-156 BLOCK LENGTH
<input type="checkbox"/>	<input type="checkbox"/>	22-187 STREET CONTINUATION
<input type="checkbox"/>	<input type="checkbox"/>	22-188 STREET ANGLE
<input type="checkbox"/>	<input type="checkbox"/>	22-189 STREET HALF
<input type="checkbox"/>	<input type="checkbox"/>	22-190 STREET ACCESS CONNECTIONS
<input type="checkbox"/>	<input type="checkbox"/>	22-191 CUL-DE-SACS
<input type="checkbox"/>	<input type="checkbox"/>	22-212 MINIMUM TRAVELWAY WIDTH
<input type="checkbox"/>	<input type="checkbox"/>	22-212 STREET IMPROVEMENTS
<input type="checkbox"/>	<input type="checkbox"/>	22-213 STREET NAME
<input type="checkbox"/>	<input type="checkbox"/>	22-214 STREET SIGN LOCATIONS
<input type="checkbox"/>	<input type="checkbox"/>	22-214 TRAFFIC SAFETY SIGNS
<input type="checkbox"/>	<input type="checkbox"/>	22-214 STREET SIGN NOTATIONS
<input type="checkbox"/>	<input type="checkbox"/>	22-214 STREET SIGN DETAILS
<input type="checkbox"/>	<input type="checkbox"/>	22-216 STREET EXTENSION SIGNS
<input type="checkbox"/>	<input type="checkbox"/>	22-221 CURB, GUTTER/SW REQ
<input type="checkbox"/>	<input type="checkbox"/>	22-222 SIDEWALK STANDARDS
<input type="checkbox"/>	<input type="checkbox"/>	22-223 PEDESTRIAN WAY
<input type="checkbox"/>	<input type="checkbox"/>	28-59.F.1 TRAFFIC CIRCULATION
<input type="checkbox"/>	<input type="checkbox"/>	28-87 STREET LIGHTS
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.5 FIRE LANES
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.5 STREET ACCESS PTS
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.5 TYPICAL SECTION ST
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.10 ROW WIDTH
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.11 SIGHT DISTANCE
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.11 ST CURVE DATA
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.11 STREET GRADES
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.11 STREET LOCATION
<input type="checkbox"/>	<input type="checkbox"/>	28-249.C.11 STREET WIDTH

N/A COMPLETE

- 28-256.C.1 ROW DED PLAT&DEED
- 28-256.C.2 ST/HWY STNDS REFER TO SUBD ORD
- 28-256.C.3 TRAVEL LANES WIDTHS
- 28-256.C.3 INTERPCL ACCESS
- 28-256.C.4 CUL-DE-SAC
- 28-256.C.5 PAVEMENT TYPE/VDOT STANDARDS

N/A COMPLETE

Overlay Districts

- 28-35 HERITAGE INTERPRETATION
- 28-57 FLOOD HAZARD
- 28-58 HISTORIC RESOURCE
- 28-59 HIGHWAY CORRIDOR
- 28-63 MILITARY FACILITY IMPACT
- 28-64 AIRPORT IMPACT
- 28-65 HISTORIC GATEWAY CORRIDOR
- 28-67 POTOMAC RIVER RESOURCE PROTECTION

N/A COMPLETE

Design & Construction Standards for Landscaping, Buffering and Screening DCSL

- 110.1 STREET BUFFERS/INTERSTATE
- 110.2 STREET BUFFERS/ARTERIAL MAJ HWY
- 110.3 TRANSITIONAL BUFFER
- 120.3 VEHICLE ACCESS DRIVE LANDSCAPING
- 120.4 STREET LANDSCAPING
- 130 SCREENING
- 140 CREDITS
- 141 SUBSTITUTIONS PERMITTED
- 142 ALTERNATIVE COMPLIANCE
- 143 DEPARTURE FROM DESIGN STANDARDS
- 152 TYPE OF PLANTS/SIZE/CHARACTERS
- 153 PLANTING SCHEDULES
- TABLE 3.0 PERMITTED PLANTINGS

N/A COMPLETE

CRPA

- 27B CHESAPEAKE BAY PRESERVATION

N/A COMPLETE

Fire Prevention Code - Fire Lanes

- 12-22 FIRE LANE

N/A COMPLETE

Water, Sewers and Sewage Disposal - As-Built Plans & Record Drawings After Completion of Construction

- 25-81.B.2 SEWER MAIN LOCATION
- 25-81.B.1 WATER MAIN LOCATION

N/A COMPLETE

Zoning and Subdivision Ordinances

- 22-28 OTHER INFORMATION REQUIRED

CHECKLIST FOR SWM AND EROSION & SEDIMENT CONTROL FOR INFRASTRUCTURE PLAN

Chapters 11 & 21.5 of the Code, Stormwater Management Design Manual & VA Erosion & Sediment Control Hdbk

N/A COMPLETE

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Stormwater Management Design Plans (Grading, Site, and Subdivision Construction Plans) – Chapter 6 & SWM Design Manual |
| <input type="checkbox"/> | <input type="checkbox"/> | Drainage Area Map - Stormwater Management Design Manual, 6.3.3 |
| <input type="checkbox"/> | <input type="checkbox"/> | Soils Map - Stormwater Management Design Manual, 6.3.3 |
| <input type="checkbox"/> | <input type="checkbox"/> | Plan Views - Stormwater Management Design Manual, 6.3.4 |
| <input type="checkbox"/> | <input type="checkbox"/> | Drainage System Design - SWM Design Manual, 6.3.4.2 |
| <input type="checkbox"/> | <input type="checkbox"/> | Profile Views - Stormwater Management Design Manual, 6.3.5 |
| <input type="checkbox"/> | <input type="checkbox"/> | 6.7.1 UTIL CROSSINGS W/INVRT ELV |
| <input type="checkbox"/> | <input type="checkbox"/> | Cross Section Views - Stormwater Management Design Manual, 6.3.5 |
| <input type="checkbox"/> | <input type="checkbox"/> | Stormwater Management Retention & Detention Basins-Code SWMDM 6.3.4.3 AND 6.3.4.4 |
| <input type="checkbox"/> | <input type="checkbox"/> | Stormwater Management Facilities - Stormwater Management Design Manual |
| <input type="checkbox"/> | <input type="checkbox"/> | Erosion & Sediment Control Plan-Narrative
Virginia Erosion & Sediment Control Handbook Chapter VI |
| <input type="checkbox"/> | <input type="checkbox"/> | Site Plan - E&SC Site Plan - VA Erosion & Sediment Control Hdbk Chapter VI |
| <input type="checkbox"/> | <input type="checkbox"/> | Minimum Standards – 9VAC25-840 Virginia Administrative Code |
| <input type="checkbox"/> | <input type="checkbox"/> | Minimum Standards & Specifications of Measures -VA Erosion & Sediment Hdbk Chapter III |

ENGINEER’S CERTIFICATION OF PLAN COMPLETION:

I, _____ duly licensed/certified in the Commonwealth Of Virginia, do hereby certify that the plan submitted with these checklists conforms to the requirements of the Stafford County Code. I further certify that the above checklists are both complete and accurate.

Signature

Certification