



Public Works Department
 801 228th Avenue SE
 Sammamish, WA 98075-9509
 Phone: 425-295-0500
 Fax: 425-295-0600
 City Hall Hours: 8:30am-5:00pm
 Permit Center: 8:30am-4:00pm
 Web: www.sammamish.us
www.mybuildingpermit.com

Stormwater Facility Information Form

“One form required per facility”

Type of Facility: Residential Commercial Regional

Facility Sketch attached Y (See Attachment 1 for example)

Facility Numbers (assigned by City Staff): DS _ _ _ _ _

Stormwater Design Manual: KCSWDM 2009 KCSWDM 1998

Plat Name: _____

Facility Location (tract name parcel number and nearest address):

Latitude: _____ Longitude: _____

Components: (eg. Detention/wet pond, storm filter, rain garden):

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Vegetation control needed: Y or N Square footage of vegetated area: _____

Maintained by: City or Private Party (please specify)

Fence Y or N If yes, Chain Link, or Wood

Maintained by: City or Private Party (please specify)

Number of storm filter cartridges installed, media type and size (if applicable):



Facility Sketch Sheet

Project No. D _____

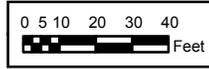
Project:

Location:

Drawn By:

Date:

Sheet: 1 of 1



Legend

- Structure
- Bioswale
- Pipe
- ▭ Pond

