Complete a separate form for each major drainage area and BMP type. (Refer to the overall drainage area map)

Jurisdiction: **ST. MARY’S COUNTY**

Structure/Project Name: ________________________________
Structure/Project Address: ________________________________

Tax Map _____ Block _____ Parcel ______ LUGM Site #________________________ Grading Permit #______

**Location:** NAD 83 Coordinates (Feet) Northing ___________ Easting ___________

6 Digit State Watershed Designation (Patuxent #02-13-11, Chesapeake Bay Proper #02-13-99, or Lower Potomac #02-14-01)

Facility Site Location: ☐ On-Site Facility ☐ Off-Site Facility

**Structure Drainage Area:**

- Facility D. A. (ac.) __________ Development Type __________ Development Type __________
- Total Project A. (ac.) __________ Impervious Area (ac.) __________ Impervious Area (ac.) __________
- Major Drainage Area # _____ Pe (inches) _______ Pe (inches) _______
- Sub Drainage Area # _____ (Development Type = NEWD, REDE, NRP, REF)

**Land Use Code** (See Attached) __________ Runoff Curve Number __________

**Impervious Area Reduction:** ☐ Convert to Grass ______ (ac) ☐ Convert to Forest ______ (ac)

**Environmental Site Design Type:**

- ☐ N-1 Disconnected Rooftop ☐ N-2 Disconnected Non-Rooftop ☐ N-3 Sheetflow to Cons. Area
- ☐ M-1 Rainwater Harvesting ☐ M-4 Infiltration Berm ☐ M-7 Rain Garden
- ☐ M-3 Landscape Infiltration ☐ M-6 Micro-Bioretention ☐ M-8 Swale
- ☐ ESD to MEP (Single –Family homes only)

**Pre-ESD BMP Type:**

- ☐ Dry Well ☐ Shallow Marsh ☐ Porous Pavement
- ☐ Grass Channel ☐ Vegetated Buffer
- ☐ 2001 Era (Single –Family homes only)
- ☐ Other (Describe): __________________________________________

**Name:** ___________________________ **Title:** ___________________________ **Phone:** ______________

**Company Name** ___________________________ **Date:** ________________

**Authorized Signature:** ___________________________

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**For Office Use Only**

**Permit Issuance Date:** ________________ **As-Built Approval Date:** ________________

**Name:** ___________________________ **Title:** ___________________________ **Phone:** ______________

**Authorized Signature:** ___________________________ **Final Inspection Date:** ________________

**STRUCT ID#** ________________

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**POI STRUCT ID#** ________________