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| **Project/Tenant Information** | | | | | | | | | | | | | | | | | | |
| **Date** |  | | | | **CIP #** | | | |  | | **Mandatory Project ID#** | | |  | | | | |
| **Project Title:** | | | | |  | | | | | | **% Design Complete:** | | |  | | | | |
| **Project Description:** | | | | |  | | | | | | | | | | | | | |
| **Airport Tenant Company :** | | | | |  | | | | | | | | | | | | | |
| **Contact Person:** | | | | |  | | | | **Phone:** | |  | | | **Fax:** | |  | | |
| **Address:** | | | | |  | | | | | | | | | | | | | |
| Street Address City State Zip Code | | | | | | | | | | | | | | | | | | |
| **Billing Address**  *(if different than above)***:** | | | | |  | | | | | | | | | | | | | |
| Street Address City State Zip Code | | | | | | | | | | | | | | | | | | |
| **Port Line of Business Representative:** | | | | |  | | | | | | | | | | | | | |
| **Location of Service:** | | | | |  | | | | | | | | | | | | | |
| **POS Project Manager:** | | | | |  | | | | | | **Phone:** | | |  | | | | |
| **Design Firm:** | | | | |  | | | | | | | | | | | | | |
| **Design Project Manager:** | | | | |  | | | | | | **Phone:** | | |  | | | | |
| **Lead Design Engineer:** | | | | |  | | | | | | **Phone:** | | |  | | | | |
| **Project Presented to Civil Design Review on:** If you have not presented to Civil Design Review and would like to schedule a time on the agenda, please go to <https://portseattle.sharepoint.com/sites/avficommittee/SitePages/Home.aspx> (Port employees only), or email [AVCommittees@portseattle.org](mailto:AVCommittees@portseattle.org). | | | | | | | | | | |  | | | | | | | |
| **Documents Provided** | | | | | | | | | | | | | | | | | | |
| Flow Calculations | | | | | Pervious/Impervious Drainage Area Calculations | | | | | | | General Arrangement Drawing | | | | | | |
| Piping Profile Drawings | | | | | Manhole and Catch Basin Details | | | | | | | Connection Details | | | | | | |
| **Connection Details** | | | | | | | | | | | | | | | | | | |
| 1. **Connection Requested for:** | | | | | | | |  | | | | | | | | | | |
|  | |  | | | **New Storm Drainage System** | | | | | | | | | | | | | |
|  | |  | | | **Expansion of Existing Storm Drainage System (Replacement)** | | | | | | | | | | | | | |
|  | |  | | | Other | | | | | | | | | | | | | |
| **2. Required Date for Connection:** | | | | | | | |  | | | | | | | | | | |
| **3. Where Connected:***(Give manhole numbers or attach sketch)* | | | | | | | |  | | | | | | | | | | |
| 1. **Project 25 Year Storm Flow:** | | | | | | | | gpm | | | | | | | | | | |
| **5. Area Served:** | | |  | | | | | Size of Area: | | | Sq. Ft. | | | | | | | |
| **6. Number of Catch Basins:** | | | | | |  | | **Size of Laterals:** | | | | | In. | | | | | |
| **7. Slope:** | | | | | | In./ft. | | Invert Elevation: | | |  | | | | | | | |
| **8. Pressure or Gravity:** | | | | | |  | | | | | | | | | | | | |
| **9. Material:** | | | | | |  | | | | | | | | | | | | |
| **10. (BMPs) Proposed** | | | | | | Water Quality Best Management Practices | | | | | | | | | | | | |
| **10. New Easement Required:**  *(If yes, outline in comments section below)* | | | | **Yes** | | | **No** | | | **Calculations Attached:** | | | | | **Yes** | | | **No** |
| **11. Drawings Attached:** | | | | **Yes** | | | **No** | | | **As-built Drawings Researched:** | | | | | **Yes** | | **No** | |
| **12. Drawing Numbers:** | | | |  | | | | | | | | | | | | | | |
| **13. Comments:** | | | |  | | | | | | | | | | | | | | |
| **14.** | | | | **A copy of the erosion control plan must be provided with each 60, 90 and 100% submittals.** | | | | | | | | | | | | | | |
| **15.** | | | | **Inspection of new service piping on the property is required before covering. When ready for inspection, contact Paul Shen, AV Infrastructure Engineer at the Port of Seattle, 206.787.5870. Call between 8:00am and 4:30pm on weekdays at least two working days prior to the inspection.** | | | | | | | | | | | | | | |
| **16.** | | | | **A final copy of “As-Built” system drawings must be provided to F&I at the conclusion of the installation containing locations, invert elevations, rim elevations, and line sizes of all modifications.** | | | | | | | | | | | | | | |

**NOTES: Utility Shutdown Request Form must be completed before connection during construction phase (7 days’ notice required).**

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| **Prepared by:** |  | **Date:** |  |
| *A revised application is required as the project progresses from pre-design to 100% design. No connections to the storm drainage system will be allowed without Facilities & Infrastructure approval of this document.* | | | |

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| **Application is:** |  | **Approved** |  | **Approved as noted** *(see below)* | |
|  |  | **Revise and Resubmit** |  | **Rejected** | |
| **Notes:** |  | | | | |
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| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Aviation/Facilities & Infrastructure | | | | | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  ***Date*** |