



Stormwater Utility Fee Facility Assessment Form

Engineer's Information

Engineer's Name: _____

Firm Name: _____

Mailing Address: _____

Street Address: _____

Phone Number: _____

Email Address: _____

Kansas License Number (PE): _____

Total Site Characteristics (Attach site plan)

Total Site Area (AC): _____

Paved Area (AC): _____

Roof Area (AC): _____

Other Impervious Area (AC): _____

Other Impervious Area Description: _____

Total Site Impervious Area (AC): _____

Exempt Impervious Area (e.g. area used by the general public including sidewalks and recreational facilities open to the general public free of charge):

Facility Name: _____ Area (AC): _____

Facility Name: _____ Area (AC): _____

Facility Name: _____ Area (AC): _____

Additional exempt impervious areas should be attached to this form on a separate sheet.

Total Site Impervious Area subject to Stormwater Utility Fee (AC): _____

Post-development

Paved Area (AC): _____

Roof Area (AC): _____

Other Impervious Area (AC): _____

Other Impervious Area Description: _____

Drainage Area Impervious Acreage (AC): _____

Runoff Coefficient (C Factor or SCS Curve Number): _____

Time of Concentration (mins.): _____

Rainfall Intensity (in/hr.)(Rational Method Only): _____

Storm Length (hrs.)(Rational Method Only): _____

Pond Water Surface Elevations	_____	_____	_____
	2-Year	10-Year	100-Year

Q_{POST}:	_____	_____	_____
	2-Year	10-Year	100-Year

Routed Hydrograph Peak Flow (cfs): _____

Flow Through Outlet (cfs): _____

Flow Over Emergency Spillway (cfs): _____

Engineer's Certification

I hereby certify that the detention/retention facility(ies) has (have) been constructed in substantial conformance with pertinent design requirements and that the detention/retention facility(ies) is (are) in an acceptable state of maintenance and repair. I further certify that these calculations, technical details, and information provided reflect accurately the condition of the detention/retention facility at the time of my inspection.

Signature and Seal of PE: _____ Date: _____