

DRAINAGE PROJECT NOTIFICATION AND WMS MAPPING REQUEST

Applicant Name*		Contact Information* (Phone and email)	
Mailing Address*			
Property Description* (subdivision, lot(s), and block)			
Plat/Grid Number		MOA Assessor's Office Property Identification Number*	
MOA Case Number(s) (Indicate which provided)			
Project Category* (Check one)	Crossing: <input type="checkbox"/> Single-Lot Residential: <input type="checkbox"/> Class 1A <input type="checkbox"/> Class 1B <input type="checkbox"/> Class 1C <input type="checkbox"/> Class 1D Small: <input type="checkbox"/> Simple <input type="checkbox"/> Complex Large: <input type="checkbox"/> Simple <input type="checkbox"/> Complex		
Parcel Physical Location* (Driving directions, roads, etc)			

Requested Services*

- Review watercourse mapping
- Special review services requested
 - Flag stream features on-site
 - Notify prior to site visit

Attempt to notify will be made using the contact information provided; however, pre-visit contact or scheduling for applicant presence cannot be guaranteed

Requested completion date: _____ (Preferred completion date)
 No later than completion date: _____ (Later completion may incur significant project delay)
 Dates and service availability cannot be guaranteed. Scheduling is based on Planning Department priorities, request receipt order, and seasonal constraints (at minimum, mapping review requires channels to be free of snow and ice).

* Required Information

Attachments:

- Draft map of known watercourses showing all streams and major drainageways entering, crossing or exiting the project, and the location(s) of downstream receiving waters.
- Preliminary post-development site map
- Threshold calculation (required for Single-Lot Residential and Small Projects only)
- Tabulation of pre- and post-development landcover (required for Small and Large Projects only)

Certification:

By signature below, I certify that I am legally entitled to authorize the requested services and that the attachments provided are complete and accurate representations of known site conditions and project plans. I further authorize Municipality of Anchorage (MOA) personnel to access the referenced site on foot for the purposes of identifying and / or mapping drainage features.

This form and its attachments constitute my notice to the MOA that I am developing plans for a drainage project or platting action and will be submitting a report of existing or proposed drainage conditions. I understand that all drainage projects are governed by the MOA Project Management and Engineering Design Criteria Manual, the MOA Drainage Design Guidelines, the Anchorage Municipal Code, and other state and federal regulations and permits

Signed

Date