



CITY OF PORTLAND
Stormwater
Management
Manual

Form 3B

SPECIAL CIRCUMSTANCES

IMPROVEMENTS BY PUBLIC AGENCIES

This form is REQUIRED when applicant proposes to pay an offsite stormwater management fee.

Please fill this form out completely. For assistance completing it, consult with the Bureau of Environmental Services (BES) staff assigned to your project. The details of your special circumstance must appear in this application. Additional information may be included if pertinent to the item being considered. Refer to Appendix D.7 of the 2014 Stormwater Management Manual for more information.

One (1) set of plans must be submitted along with this form. Plans are to clearly indicate the new or redeveloped impervious area and proposed facilities.

Information about the status of your application may be obtained by calling the BES Project Manager. Applicants will receive a copy of final decision via email.

(for official use only)

Received by: _____

Date: _____

Deemed complete on: _____

I PROJECT INFORMATION

BES Project Number: _____ Agency Project Number (s): _____

Location and Extent: _____

Agency Name: _____ Project Manager: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Engineer Name: _____ Firm Name (if applicable): _____

Engineer Street Address: _____

City/State/Zip: _____

Engineer Phone: _____

Engineer Email: _____

Describe the development or redevelopment project *(one set of plans must be submitted with this form)*:

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Indicate the proposed infiltration and discharge method:

Infiltration onsite _____ %
(refer to Section 1.3.1 of the Manual)

Discharge Offsite 100% _____ %
(refer to Section 1.3.1 of the Manual)

Overflow will be directed to (check all that apply):

- Subsurface Facility Surface Water
 Stormwater Sewer Combined Sewer

Describe the method and location:

For the following requirements, indicate the percentage of impervious area that you plan to meet onsite:

Flow Control 100% _____ % N/A (explain below)
(refer to Section 1.3.2 of the Manual)

Pollution Reduction 100% _____ % N/A (explain below)
(refer to Section 1.3.2 of the Manual)

If you checked N/A for either **Flow Control** or **Pollution Reduction**, please explain:

Signature: (Applicant) _____ **Date:** _____

Print Name: _____