



SWM DESIGN FORM

****Complete a separate SWM Design Form for each BMP. All forms to be included in the final SWM Report****

Site Name: _____

Location _____

Street Address: _____, Frederick, Maryland Zip: _____

Map: _____ Grid: _____ Parcel: _____ Lot: _____

Facility Site Location: On-Site Facility Off-Site Facility ADC Map Coordinates: _____

	Feet	Meters		
Northing:			Latitude:	
Easting:			Longitude:	

BMP Description _____

Facility Name as shown on construction plans: _____

See the BMP Description Guide for information on how to complete the section below:

BMP Name: _____

BMP Type: _____

BMP Class: E S A*

Construction Type: NEWD REDE REST CONV**

*If Alternative BMP is being used complete the SWM Design Form – Alternative Practices

**If proposed BMP is a conversion of an existing BMP specify the following for the existing BMP being converted:

BMP ID: FC _____ BMP Type: _____

Drainage Area _____

Total Project Area: _____ acres Drainage Area to BMP: _____ acres Impervious Area: _____ acres

Land Use Code: _____ RCN: _____ P_E Provided: _____ inch Number of BMPs needed to obtain PE: _____

FOR OFFICE USE ONLY	
Structure Number Assigned: _____	Associated Structure Number(s): _____
Comments: _____	

Last Revised: December 2018

ENGINEERING DEPARTMENT