



PLANNING AND CODE ADMINISTRATION

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STORMWATER MANAGEMENT WAIVER APPLICATION

All information must be complete to initiate processing of application

SUBJECT PROPERTY

Street Address _____

PROJECT NAME _____

APPLICANT/BILLING CONTACT

Business Name _____

Primary Contact _____

Street Address _____ Suite No. _____

City _____ State _____ Zip Code _____

Telephone Numbers: Work _____ Cell _____ E-mail Address _____

OWNER

Business Name _____

Primary Contact _____

Street Address _____ Suite No. _____

City _____ State _____ Zip Code _____

Telephone Numbers: Work _____ Cell _____ E-mail Address _____

DEVELOPER

Business Name _____

Primary Contact _____

Street Address _____ Suite No. _____

City _____ State _____ Zip Code _____

Telephone Numbers: Work _____ Cell _____ E-mail Address _____

ENGINEER

Business Name _____ MD Registration No. _____

Primary Contact _____

Street Address _____ Suite No. _____

City _____ State _____ Zip Code _____

Telephone Numbers: Work _____ Cell _____ E-mail Address _____

LOCATION DESCRIPTION _____

PROJECT DESCRIPTION

PLAN TYPE: (check all that apply) Concept Preliminary Final

WATERSHED: Great Seneca Lower Great Seneca Creek Middle Great Seneca Creek
 Muddy Branch Upper Rock Creek Watts Branch

TRIBUTARY: Muddy Branch Long Draught Branch Whetstone Run Multiple

STORMWATER MANAGEMENT ACRES PROVIDED

On Site Quality Acres	_____	On Site Quantity Acres	_____
Requested Waiver Quality Acres	_____	Requested Waiver Quantity Acres	_____
Total SWM Acres	_____	Total Acres Disturbed	_____

NUMBER OF STRUCTURES PROPOSED

Environmental Site Design	_____	Dry Pond	_____
Wet Pond	_____	Water Quality Inlet	_____
Underground Storage	_____	Sand Filter	_____
Structural BMP	_____	Other (<i>please specify</i>)	_____