



APPLICATION FOR DISCHARGING STORM WATER INTO HCDD1 SYSTEM AND / OR HCID SYSTEM

Applicant: _____ Permit No. _____

Address: _____

Subdivision Name: _____

Name of Receiving Ditch: _____

Location or Drainage Area (Provide Location Map): _____

NAD 1983 Coordinates: X: _____ Y: _____

New or Existing Entrance: _____ Calculated Discharge (Q): _____

Number of Acres Developed: _____ Size of Discharge Structure: _____

Discharge Flow Line of Discharge Structure: _____

Flow Line Receiving Ditch: _____ Top of Water Receiving Ditch: _____

Top of Receiving Ditch Elevation: _____ Top of Water of Connecting Ditch Lateral: _____

Head Loss Calculated: _____

Formula Used: _____

Project Engineer (Name / email address): _____

Firm: _____ Phone No.: _____

Address: _____ City, State, Zip Code: _____

Engineer's Signature: _____ Date: _____

❖ A City with the appropriate review boards considering / granting approval to the subdivision shall be considered the Owner; otherwise, Owner / Developer signature will be required. Select One.

City Representative Owner

Signature Date Print Name & Title

APPROVAL FROM IRRIGATION DISTRICT

This is to certify that we have received the above application and do not object to the plan and application as shown. Additional requirements may be required by the Irrigation District. Contact the Irrigation District prior to the commencement of any construction.

- If not an Irrigation District Facility, please initial below.

Irrigation District Name. _____

Signature Date Printed Name & Title

- Not an Irrigation District Facility: _____

HIDALGO COUNTY DRAINAGE DISTRICT NO 1 – REVIEWER

Initial & Date

APPROVAL FROM HIDALGO COUNTY DRAINAGE DISTRICT NO 1

Raul E. Sesin, PE, CFM – District General Manager Date