



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 reviewed the above application and we hereby approve the plan and application as shown.

- If not an Irrigation District Facility, please fill out the information and initial the statement below.

Irrigation District Name. _____

Signature Date Printed Name & Title

- Not an Irrigation District Facility: _____

APPROVAL FROM HIDALGO COUNTY DRAINAGE DISTRICT NO 1

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