

Design Review Check List

Soil Quality Restoration for new lawn establishment

April 2015

Applicant: _____ Date: _____

Submitted By: _____ Project Location: _____

- 1) Size of area being treated _____ SF _____ Ac (SF / 43,560)
- 2) If the area being treated will only manage rain that falls directly on it which method from the Chapter 2E-6 of the Iowa Stormwater Management Manual (ISWMM) will be used to treat the area (Method 1 – 7) _____
- 3) WQv _____ Gallons / _____ CF (show calculations below)
L x W / 43,560 = _____ ac.
_____ ac x 27,152 gals/ac/in = _____ gallons/in
_____ gallons/in x 1.25 in = _____ gallons/WQv
_____ gallons/WQv x 0.1337 CF/gal = _____ CF/WQv
- 4) If area being treated will manage runoff from impervious surfaces show calculations for determining that storage capacity exceeds the 1.25 inch WQv rainfall or provide documentation of the OM content and depth of decompacted profile and the capacity of the soil to absorb more the 1.25 inches from Table 6 in Chapter 2E-6 of the ISWMM.

(Need to provide formula for calculated excess capacity)

- 5) From Table 8 of Chapter 2E-6 show the excess water storage volume _____ inches and the factor to determine the maximum impervious surface that can be treated _____.
- 6) How many square feet of impervious surface will be managed by the soil quality management/restoration area? _____.
- 7) Provide the quantities of materials applied (please attach a copy of materials calculations and bills/weight slips):
 - a. sand _____ tons;
 - b. soil _____ tons or CY;
 - c. compost _____ tons or CY
- 8) Provide a copy of the planting plan with quantity of seed or plants used and a listing of species and rates applied.

9) Please describe the Erosion and Sediment Control measures until vegetation is established. _____

10) Please attach a map of the soil management / restoration area.

FOR REVIEWER USE ONLY

This design appears to comply with the standards in the Iowa Stormwater Management Manual.

This design does not appear to comply with the standards in the Iowa Stormwater Management Manual.

Comments: _____

Name of Reviewer: _____ Date: _____

Signature: _____