



Wet Detention Pond

Record of Construction
Engineer's Certification of Completion

Water Resources Department
Stormwater Management Division
 2602 S. Elm-Eugene St.
 Greensboro, NC 27406
 (336) 373-2055

Project: _____

Date: _____

	<u>Description</u>	<u>Design</u>		<u>As-built</u>	
1	Slope of embankments (3:1 or flatter)				
2	Elevations of the following:				
A	Bottom of clearing, grubbing, & stripping under dam footprint				
B	Bottom of key or cutoff trench				
C	Bottom of pond				
D	Bottom of riser				
E	Top of riser				
F	Water quality orifice				
G	Top of forebay baffle				
H	Invert of inflow & outflow pipe(s)				
3	Top of dam: elevation & width				
4	Bottom width of key or cutoff trench				
5	Compaction requirement of earth work in key or cutoff trench & embankments (e.g. 95% Standard Proctor)				
6	Normal pool depth (measured from top of sediment storage)				
7	Is 10-foot wide vegetated shelf provided around all sides of main pond?				
8	Forebay maintenance access provided (top of embankment to pond bottom)?				
A	Width of maintenance bench				
9	Barrel seepage control: type & size				
10	Size & material of riser/barrel				
11	Verification of volume:				
A	Permanent sediment storage (ft ³) allocation to forebay & pond				
B	Permanent pool surface area (ft ²)				
C	Temporary water quality volume (ft ³)				



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12	Emergency Spillway: width & crest elevation				
13	Waterstops installed (if applicable)				
14	Size of riser footing (if applicable)				
a	Rebar installed (if applicable)				



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**ENGINEER'S CERTIFICATION OF
STORMWATER CONTROL COMPLETION**

I certify that, pursuant to generally accepted engineering standards in the community, it is my professional opinion that the stormwater control(s) labeled as _____ on this plat (or on name of plat) as recorded in PB _____, PG _____ in the Office of the Guilford County Register of Deeds has been completed in conformance with the plans and specifications approved on _____, has its full design volume available, and is functioning as designed.

P.E. SEAL:

SIGNATURE: _____ DATE: _____