

PROJECT TITLE
 PLAN TYPE & PHASE/PARCEL No.
 (Location, Street Address/Cross Roads)
 Section, Township & Range

OWNER

Company _____
 Contact Person _____
 Address _____
 City, State Zip _____
 PHONE: _____
 FAX: _____

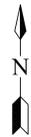
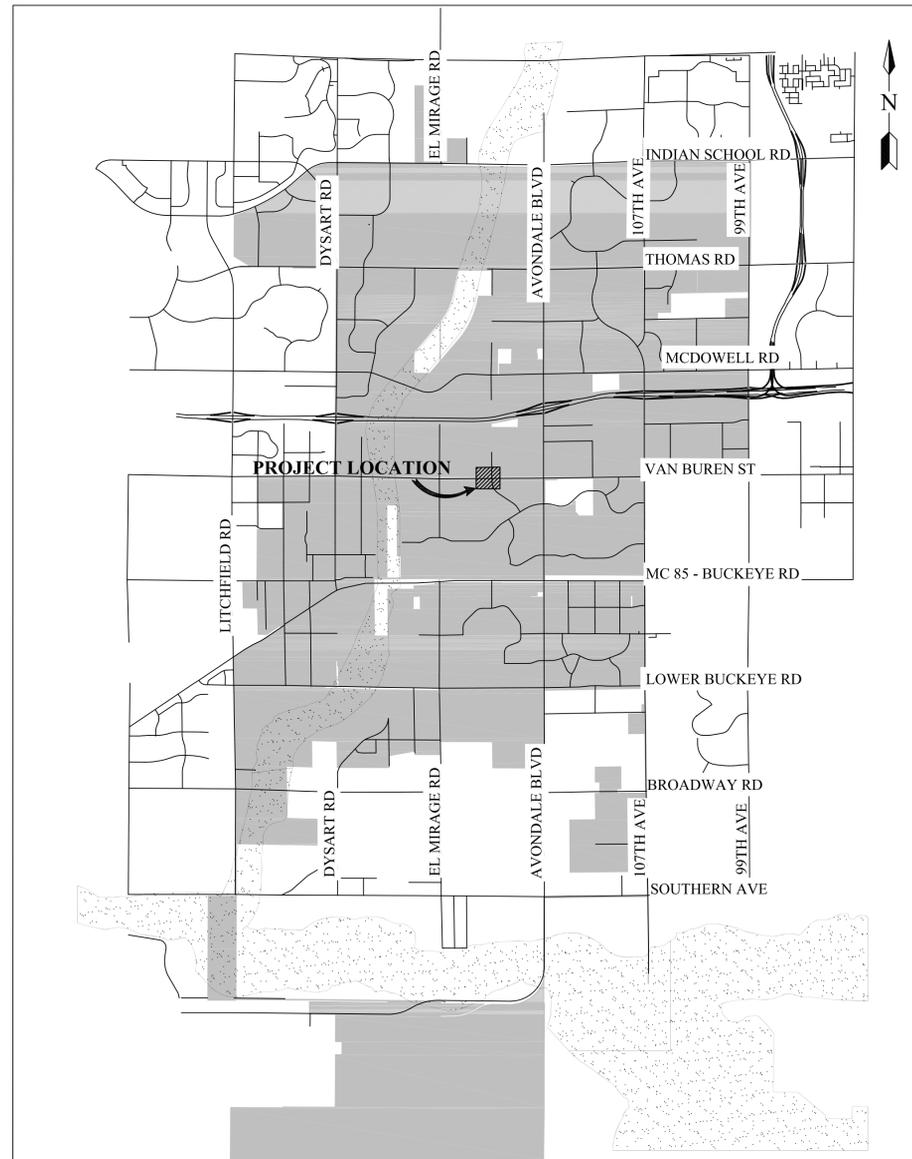
ENGINEER

Company _____
 Contact Person _____
 Address _____
 City, State Zip _____
 PHONE: _____
 FAX: _____

BENCHMARK:

BENCHMARK IS
 INTERSECTION OF
 ELEVATION _____
 DATE SHOT: _____

AREA MAP



VICINITY MAP

QUANTITIES

	ON-SITE	UNIT	OFF-SITE	UNIT
GRADING & DRAINAGE				
GRADING		SY	N/A	SY
STORM SEWER PIPE		LF		LF
STORM SEWER MANHOLE		EA		EA
UNDERGROUND RETENTION PIPE		LF	N/A	LF
DRYWELL		EA	N/A	EA
SPILLWAY		EA		EA
RIP RAP		CY		CY
CURB OPENING		LF		LF
BOX CULVERT		EA		EA
CATCH BASIN/HEADWALL		EA		EA
SCUPPER		EA		EA
IRRIGATION				
IRRIGATION PIPE		LF		LF
IRRIGATION MANHOLE/STRUCTURE		EA		EA
FLAT CONCRETE				
SIDEWALK	N/A	SF		SF
CURB AND GUTTER/SINGLE CURB/RIBBON	N/A	LF		LF
VALLEY GUTTER AND APRON	N/A	SF		SF
BUS BAY, RT. TURN LANE	N/A	SF		SF
RETURN TYPE DRIVEWAY	N/A	SF		SF
DRIVEWAY (NON-RETURN TYPE)	N/A	EA		EA
SIDEWALK RAMP	N/A	EA		EA
PAVING				
NEW CONC/ASPHALT PAVING	N/A	SY		SY
ASPHALT/CONC OVERLAY	N/A	SY		SY
SLURRY SEAL/MICRO SEAL	N/A	SY		SY
UTILITY ADJUSTMENT (IN R/W STREET)	N/A	EA		EA
SURVEY MONUMENT	N/A	EA		EA
STREET SIGN	N/A	EA		EA
BARRICADE/GUARDRAIL	N/A	LF		LF
STRIPING (4" EQUIV.)	N/A	LF		LF
ASPHALT/CONC REPLACEMENT	N/A	SY		SY
STREET LIGHTS	N/A	EA		EA
TRAFFIC SIGNAL	N/A	EA		EA
FIBER UTILITIES	N/A	N/A		N/A
OPEN TRENCH	N/A	LF		LF
BORE	N/A	LF		LF
BORE/SPLICE PITS	N/A	EA		EA
CONDUIT 2"	N/A	LF		LF
CONDUIT 4"	N/A	EA		EA
SPLICE VAULT	N/A	EA		EA
PULL BOXES NO.7	N/A	EA		EA

Utility Conflict Notification Block

THESE PLANS HAVE BEEN SUBMITTED TO THE FOLLOWING UTILITY COMPANIES. WHERE THE WORK TO BE DONE CONFLICTS WITH ANY OF THESE UTILITIES, THE CONFLICTS SHALL BE RESOLVED AS SPECIFIED IN THE SPECIAL NOTES AND/OR AS OTHERWISE NOTED ON THESE PLANS. CONFLICTS ARISING DURING THE COURSE OF CONSTRUCTION FROM UNFORESEEN CIRCUMSTANCES SHALL BE REPORTED TO THE INTERESTED UTILITY COMPANY AND BE RESOLVED BY THEM AND THE DESIGN ENGINEER.

SALT RIVER POWER DISTRICT	_____	_____
	COMPANY REPRESENTATIVE	DATE
ARIZONA PUBLIC SERVICE	_____	_____
	COMPANY REPRESENTATIVE	DATE
CENTURY LINK	_____	_____
	COMPANY REPRESENTATIVE	DATE
COX COMMUNICATIONS	_____	_____
	COMPANY REPRESENTATIVE	DATE
SOUTHWEST GAS	_____	_____
	COMPANY REPRESENTATIVE	DATE
SALT RIVER IRRIGATION DISTRICT	_____	_____
	COMPANY REPRESENTATIVE	DATE
ROOSEVELT IRRIGATION DISTRICT	_____	_____
	COMPANY REPRESENTATIVE	DATE
KINDER MORGAN	_____	_____
	COMPANY REPRESENTATIVE	DATE

SHEET INDEX:

XXX
 XXX

Storm Water Certification

- ALL DRAINAGE DESIGN WILL COMPLY WITH THE DRAINAGE DESIGN MANUAL FOR MARICOPA COUNTY, ARIZONA, VOLUMES I & II, JANUARY 28 1996, AS AMENDED OR UPDATED.
- THE DEVELOPMENT WILL PROVIDE ADEQUATE RETENTION FOR THE 100-YEAR 2-HOUR STORM. THIS INCLUDES ONSITE AND ADJACENT HALF STREET RUNOFF.
- IN ALL CASES THE HALF STREET FLOW FROM THE 100-YEAR, 2-HOUR STORM WILL BE CONTAINED WITHIN THE PUBLIC RIGHT OF WAY.
- THE COLLECTION SYSTEM FOR THE 10-YEAR 2-HOUR STORM HAS BEEN DESIGNED SO THAT ALL ARTERIAL AND MAJOR COLLECTOR STREETS SHALL MAINTAIN ONE DRY LANE IN EACH DIRECTION.
- FINISHED FLOOR ELEVATIONS MUST BE MINIMUM OF 14-INCHES ABOVE THE OUT FALL TOP OF CURB ELEVATION, OR 12-INCHES ABOVE THE COMPUTED 100-YEAR 2-HOUR WATER SURFACE ELEVATION WHICH EVER IS GREATER.
- ALL STORM WATER RETENTION SHALL BE DRAINED WITHIN 36 HOURS. IF BASINS DO NOT DRAIN WITHIN 36 HOURS, DEVELOPER/OWNER SHALL ENACT MEASURE TO CORRECT.

SIGNATURE _____

DATE _____

CITY OF AVONDALE

MAYOR

MIKE PINEDA

VICE MAYOR

CURTIS NIELSON

CITY MANAGER

RON CORBIN

COUNCIL MEMBERS

MAX WHITE TINA CONDE
 GLORIA SOLORIO JEANETTE GARCIA
 SHARI WEISE

CITY CLERK

MARCELLA SARMIENTO

APPROVALS

CITY ENGINEERING DEPARTMENT _____ DATE _____

THE CITY APPROVES THESE PLANS FOR CONCEPT ONLY AND ACCEPTS NO LIABILITY FOR ERRORS OR OMISSIONS.

11465 W. CIVIC CENTER DRIVE
 AVONDALE, AZ 85323
 (623) 333-4200

"AS-BUILT CERTIFICATION"

I HEREBY CERTIFY THAT THE "AS-BUILT" INFORMATION SHOWN HEREON WAS OBTAINED UNDER MY DIRECT SUPERVISION AND IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

REGISTERED LAND SURVEYOR _____

SEAL _____

REGISTRATION NUMBER _____

DATE _____

COMPANY NAME:
 ADDRESS:
 CITY/STATE/ZIP CODE:
 PHONE NUMBER:

NOTE:

ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE MOST RECENT EDITION OF THE CITY OF AVONDALE'S SUPPLEMENT TO THE M.A.G. SPECIFICATIONS AND STANDARD DETAILS CURRENTLY ON FILE AND AVAILABLE AT THE CITY OF AVONDALE'S ENGINEERING DEPARTMENT OR ONLINE AT THE CITY OF AVONDALE'S WEBSITE.



RESIDENTIAL PAVING PLANS

DEVELOPER/OWNER	NAME _____
PROJECT NAME	NAME _____
PLAN TYPE	NAME _____
SEAL	_____
ORIGINAL PLAN DATE	_____
LATEST REVISION DATE	_____
SHEET NUMBER	_____
OF	_____
PROJECT NUMBER	XXXX