

Compliance with comprehensive Plan \_\_\_\_yes\_\_\_\_No  
Previously Reviewed? \_\_\_\_yes\_\_\_\_no

Reference Number: \_\_\_\_\_  
Date received: \_\_\_\_\_  
*To be completed by staff*

CHARLES COUNTY GOVERNMENT  
DEPARTMENT OF PLANNING AND GROWTH MANAGEMENT

**APPLICATION FOR AMENDMENT TO THE CHARLES COUNTY  
COMPREHENSIVE WATER AND SEWERAGE PLAN**

*Note to the Applicant:*

This application form must be completed in its entirety. If an item is not applicable to your project, please write "N/A" in the space provided. Incomplete applications will be returned without County review. The applicant is also cautioned that an application cannot be reviewed more than once during a two-year period, unless substantial changes have been made. A non-returnable application fee is required upon submittal of this application. If the application has been reviewed within the last two years and does not reflect substantial changes, or if the application is incomplete, the application will be returned without County review and the application fee will be forfeited by the applicant.

Please note the reference number assigned to your application at the time for submittal and use it on all correspondence with the County.

I. Applicant Requesting Service Category Amendments:

I, the Applicant, hereby acknowledge and agree to the terms, conditions and requirements set forth in the current Charles County Comprehensive Water and Sewerage Plan, as a condition of receiving the service area change designation (priority classification) applied for:

Agent: \_\_\_\_\_  
Address of Agent: \_\_\_\_\_  
\_\_\_\_\_  
Telephone of Agent: \_\_\_\_\_  
Signature of Agent: \_\_\_\_\_  
Date: \_\_\_\_\_  
Print Name of Agent: \_\_\_\_\_

---

---

Owner/Applicant: \_\_\_\_\_  
Address of Owner/Applicant: \_\_\_\_\_  
\_\_\_\_\_  
Telephone of Owner/Applicant: \_\_\_\_\_  
Signature of Owner/Applicant: \_\_\_\_\_  
Date: \_\_\_\_\_  
Print Name of Owner/Applicant: \_\_\_\_\_

Reference Number: _____ Project Name: _____
--

II. Project Location:

See instructions for completion of this section.

Location and/or Address:	_____
Project/Subdivision Name:	_____
Size of Property:	_____ Acres
Tax Map #/Grid#:	_____
Parcel:	_____
Zoning-Existing:	_____
Comprehensive Plan Area Designation:	_____
Has the property been subdivided?	_____
If yes, subdivision plat # and Name:	_____
Date of approval:	_____
Date plat recorded:	_____
Liber: _____	
Folio: _____	

Has this property been submitted previously as an amendment to the Comprehensive Water and Sewerage Plan?

\_\_\_\_\_yes      \_\_\_\_\_no

If yes, when was the project last submitted? \_\_\_\_\_ What cycle? \_\_\_\_\_

Was the proposed amendment denied? \_\_\_\_\_

If the proposed Amendment was denied, please attach a brief summary outlining the changes made to the application since the previous submittal.

Reference Number: _____
Project Name: _____

III. Proposed Project Description

In the event that the project is multi-phased, the attached table should be completed for each phase and made an attachment to this application.

RESIDENTIAL	Acreage	#Units	Water Demand (mgd)	Sewerage Production (mgd)
1. Single Family				
2. Townhouse or other				
3. Garden Apartment				
4. High Rise				
5. Other (Specify)				
<b>COMMERCIAL</b>	<b>Acres</b>	<b>Sq. Ft.</b>		
# of units _____				
1. Neighborhood				
2. Community				
3. Regional				
4. Other (Specify)				
<b>OFFICE</b>				
# of floors _____				
1. Professional				
2. Business				
3. Government				
4. Other (Specify)				
<b>INDUSTRIAL</b>				
1. Manufacturing				
2. Warehousing				
3. Independent Ind. Building				
4. Other (Specify)				
<b>TOTAL</b>				

Reference Number: _____
Project Name: _____

IV. Service Category Amendment

See Instructions to complete this section.

Existing Water Service Category: \_\_\_\_\_  
Requested Water Service Category: \_\_\_\_\_

If service is to be provided by an existing water service provider, complete the following: (if not applicable, mark "N/A")

Name of Water Service Provider: \_\_\_\_\_  
Address of Water Service Provider: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone of Water Service Provider: \_\_\_\_\_  
\_\_\_\_\_  
Available Capacity of Water Service  
Provider without the Proposed Project: \_\_\_\_\_  
Existing Sewer Service Category: \_\_\_\_\_  
Requested Sewer Service Category: \_\_\_\_\_

If service is to be provided by an existing sewer service provider, complete the following: (if not applicable, mark "N/A")

Name of Sewer Service Provider: \_\_\_\_\_  
Address of Sewer Service Provider: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone of Sewer Service Provider: \_\_\_\_\_  
Available Capacity of Sewer Service  
Provider without the Proposed Project: \_\_\_\_\_

Applicant shall provide, an attachment to this application, a summary by phase of the capital costs involved in providing water and sewer service to the project. These costs shall include all line work, metering, valves, additional treatment capacity (if required to be constructed to serve the project), engineering, legal, administrative, right-of-way, construction and contingency costs.

Reference Number: _____
Project Name: _____

V. Maps

Applicant to attach the following maps as part of this application package:

1. Location map at 1: = 2000;. Map shall fit on 8 ½" 11" paper, or be divided in such a way as to fit on a series of 8 ½" x 11" sheets. If a series of maps is used, a key map shall be located in the upper right corner of each map to indicate position of map within overall project. In the case of a series of maps, the total number of maps contained in the series will also appear in the lower right hand corner (i.e. "Map 1 of 6") Maps shall be reproducible. Color submittals shall be reproducible in black and white. The project name shall be clearly legible in the lower right hand corner. A space shall be left for the Reference Number (to be filled in by the County.)
2. Map outlining the project site on the respective Water and Sewer Maps (see Instructions to obtain current Water and Sewer Map base.)
3. Map outlining connection to existing water and sewer lines (if applicable.) Map should include line sizes, pump station requirements (peak flow, total dynamic head, number of pumps), valves and caps. In the event of a dry line installation, these lines should be so marked on the maps.

VI Calculations.

As an attachment to this application, applicant shall provide all calculations estimating flow by phase, sizing of all facilities and unit construction costs derivations.

VII Additional Information required

If the proposed project is in excess of 200 acres, please provide a letter of intent or justification statement which explains the development plan concept and details the locations, uses and densities proposed.

ALL INFORMATION PROVIDED AS PART OF THIS APPLICATION PACKAGE MUST BE COMPLETED ON 8 ½: X 11" SIZE PAPER. INFORMATION CONTAINED WITHIN THESE APPLICATIONS WILL BECOME PART OF A PUBLIC INFORMATION PACKAGE. FOR FURTHER INFORMATION, CALL PLANNING AND GROWTH.

## INSTRUCTIONS

### CHARLES COUNTY GOVERNMENT DEPARTMENT OF PLANNING AND GROWTH MANAGEMENT

#### APPLICATION FOR AMENDMENT TO THE CHARLES COUNTY COMPREHENSIVE WATER AND SEWERAGE PLAN

Charles County updates the Comprehensive Water and Sewerage Plan annually.

Your use of this form represents an opportunity to develop and keep current a capital improvement plan for your community. It focuses attention on the needs of the community and the financial requirements to meet those needs.

Charles County receives several proposed amendments to the Comprehensive Water and Sewerage Plan each cycle. In order to efficiently process the applications, careful completion of this application form is required. Should you have any questions, please call Charles County Planning at (301) 645-0540 or (301) 870-3896. You may also find necessary information on our website [www.charlescounty.org/pgm](http://www.charlescounty.org/pgm).

#### I Applicant Requesting Service Category Change

The “agent” is the entity which has completed the application and is available to respond to comments and questions from Charles County. The agent and the owner/applicant can be the same. All correspondence regarding the application will be sent both to the agent and the applicant.

#### II Project Location

A general location or address should be provided. If the property is a large parcel, its location can be described in conjunction with the nearest major road. (Since maps are to be provided, this description can be brief.)

The tax map number, grid number and parcel number can be obtained by calling the County Public Facility Planner at (301) 645-0540.

The “Comprehensive Plan Area Designation” can be determined by reviewing the “Land Use Concept Plan” within the Charles County Comprehensive Plan. Possible responses to this question include: Development District, Town Center, Planned Unit Development. The Comprehensive Plan and the Comprehensive Land Use Plan can be found on our website at the following address:

[www.charlescounty.org/pgm/planning/plans/commplanning/compplansum/compplan.pdf](http://www.charlescounty.org/pgm/planning/plans/commplanning/compplansum/compplan.pdf)

If the project was previously submitted (in the last two years) for consideration as an amendment to the Comprehensive Water and Sewerage Plan, the applicant should ascertain that the application reflects significant changes. The Charles County Government will not review the same application twice within two years.

### III Proposed Project Description

The applicant should complete the Proposed Project Description form for each phase of the project. If the proposed project contains only one phase, this should be noted. Multi-phase projects should insert a Proposed Project Description form for each phase, in order, following Application Page 3.

The County currently uses the following flow generation factors in calculating flow:

	<u>Sewer Flow per unit<sup>a</sup></u>	<u>Water Flow per unit</u>
Single Family	333 <sup>c</sup>	260
Town House	258 <sup>c</sup>	202
Duplex	258 <sup>c</sup>	202
Apartment	221 <sup>c</sup>	173
Commercial/Industrial <sup>b</sup>	2,000	2,000

<sup>a</sup>Peaking factor as per MDE: 4 : 1

<sup>b</sup>I/I Factor (WSSC): 200 gpd/acre

<sup>c</sup>Includes I/I

Applicant may use Alternative flow generation factors. Please provide justification of flow generation factors which differ from those above.

### IV Service Category Amendment

The applicant should verify the amount of capacity available from the Water and Sewer Service Provider to complete this page. Capacity available is limited to the lowest capacity available in either the pipe lines, the treatment works or the disposal capacity. The Comprehensive Water and Sewer Plan contains tables which include the treatment capacities for existing water and sewer facilities within the County. Confirmation of pipeline capacity is the responsibility of the applicant. If the applicant proposes an on-site facility, this should be stated here.

The applicant must provide a summary of capital costs for provision of service to the project.

## V Maps

The maps are defined within the application form. For a nominal fee, Charles county can provide the applicant with a computerized printout of the proposed project's area, for use in the application package. The applicant should allow 6 weeks from the date of request for a computerized printout.

## VI Calculations

Charles County serves as a reviewing agency for amendments to its Comprehensive Water and Sewerage Plan. Provision of clear, concise design calculations will facilitate the reviewing process. Any major discrepancies will be discussed with the applicant.

## VII Additional Information required

If the applicant's project is in excess of 200 acres, a letter of intent or justification of the project is required. Failure to submit this item will result in the application being returned without review.