PERMIT

PERMIT MUST BE POSTED AT PROJECT SITE, VISIBLE FROM ROAD

Permit Number 18-03  Permit Date: 02/02/18

Permit Granted To:
Essentia Health St. Mary's Detroit Lakes

Project Address 1027 Washington Ave
City, State, ZIP: Detroit Lakes, MN 56501

Project Type Impervious Surface Coverage > 25%: Site reconstruction of .61 acres from .33 acres to .26 acres impervious surface area for helipad, sidewalk, and stormwater management facilities construction

Permit Granted with the Following Conditions to be Satisfied by the Permit Holder:

1) Approved per Wenck Associates review recommendation, Review #20-17 dated 1/5/13.
2) Project will be constructed as shown on approved site demolition, grading, utility, paving, and erosion control plans, prepared by BKBM Engineers, dated 12/28/2017.
3) Owner is responsible for long-term maintenance of the project as described Stormwater Best Management Practices Operation and Maintenance Plan, prepared by BKMB Engineer, received 02/02/2013.

**All measures must conform to other applicable Zoning and Shoreland Ordinance regulations (Becker County, City of Detroit Lakes, Minnesota Pollution Control Agency, MN Department of Natural Resources)

This permit is valid for 18 months.

Permit may be revoked at any time upon violation of Pelican River Water Management Rules. Any changes to this site permit results in nullification of this permit and a new permit will have to be obtained.

Signature of Tera Guettel, District Administrator
PELICAN RIVER WATERSHED DISTRICT
PERMIT REVIEW

REVIEW DATE: 1/5/18
WENCK REVIEW ID: 20-17
ITEM: Detroit Lakes Heli pad

RECOMMENDATION TO DISTRICT ADMINISTRATOR:

X Issue permit

Verify compliance with conditions before permit issue (see end of report)

Deny permit

APPLICANT: Essentia Health St. Mary’s Detroit Lakes

PURPOSE: The proposed project involves the re-development of a 0.61-acre site. An existing parking lot and underground stormwater management system will be demolished to construct a helipad. Following completion, approximately 0.26 acres of the 0.61-acre site (43%) will be converted to impervious area.

LOCATION: 1027 Washington Avenue

APPLICABILITY:
Total impervious surface (new and existing) in excess of 25% of lot area

EXHIBITS:
1. PRWD Permit Application Form, completed and signed by Applicant, dated 11/22/17, rcvd. 11/22/17.
2. Topographic survey, by Meadowland Surveying, dated 8/16/17, rcvd. 11/22/17.
3. Site demolition, grading, utility, paving, and stormwater management plans (C1.0-C5.0), by BKBM Engineers, dated 12/28/17, rcvd. 12/28/17.

FINDINGS:

Maintenance: A detailed schedule indicating dates and sequence of land alteration activities has not been received. A detailed description of how erosion and sediment control and soil stabilization measures will be monitored, maintained, and removed has
been received. The name, address and phone number of the party responsible for maintenance of all erosion control measures has been provided. A maintenance plan for on-site treatment measures has not been provided.

Soils & Erosion Control Plan: Soils affected by the proposal are Dorset-Corliss complex, Hydrologic Soil Group B, according to the NRCS Soils Survey. Preliminary landscaping plans for storm water treatment practices and site re-vegetation has been provided. Adjacent properties are protected from sediment deposition. Wetlands, waterbodies and water conveyance systems are protected from erosion. Project site is not greater than 1 acre; an NPDES permit is not required.

Grading Plan: The location/dimension of existing property lines, roads, structures, utilities, easements, and paved and unpaved areas has been provided. A detailed site topographic plan (minimum 2-foot contours) for the proposed project conditions, which clearly indicates alterations to existing grades and topographic features, has been provided.

Stormwater & Hydraulics: Stormwater leaving the site is discharged into a well-defined receiving channel or pipe and routed to a public drainage system. The rate of post-development runoff from the site does not exceed pre-development rates for the 5-, 25-, and 100-year, 24-hour storm events.

Water Quality: Water quality treatment facilities achieve 90% TSS and 50% total phosphorus removal. The drainage swale is designed correctly.

RECOMMENDATION TO DISTRICT ADMINISTRATOR:

  X  Issue permit

  Verify compliance with conditions before permit issue (see end of report)

  Deny permit

As your re-submittal is reviewed, we may find the need to request additional information, and will so inform you.

Notes:
It is Wenck’s understanding that:
  a. PRWD has verified that the existing underground stormwater storage chambers only receive flow from impervious area that has been identified for removal in this project, and
  b. PRWD is aware that the applicant’s engineer has omitted the existing storage chambers from the existing condition calculations, which may result in proposed discharge rates greater than existing. PRWD accepts this risk because the proposed impervious area is less than the existing impervious area and the proposed runoff volumes are less than existing runoff volumes.
PERMIT APPLICATION FORM

Property Owner(s): Essentia Health St. Mary's Detroit Lakes
Mailing Address: 1027 Washington Ave.
Detroit Lakes, MN 56501
Phone: 218-314-7018  Cell: 218-234-0573
Email: Joshua.Zacharias@EssentiaHealth.org
Project Address: 1027 Washington Ave.
Detroit Lakes, MN 56501
Parcel ID Number(s): 4970 45 005

Permit should be sent to: Mailing Address Contractor Call to pick up Phone: 

PERMIT APPLICATION PURPOSE (indicate all which apply)

A. Alteration to land, vegetation, and/or impervious surface within the Shore Impact Zone
B. Rip-rap or beach sand blanket (installation, repair, replacement)
C. Alteration to land, vegetation, and/or impervious surface within the Shore Impact Zone
D. Retaining wall (installation, repair or replacement within the Shore and/or Bluff Impact Zones)

E. Impervious surface (cumulative)

F. Subdivisions, plat or Planned Unit Developments (PUD's)
G. Highway, road, street, parking lot or public water access (new or reconstruction)
H. Bridges, culverts, inlets to waters of the state; storm sewers (new or replacement)
I. Groundwater Dewatering

Project Purpose/Description: (Please be specific)

Adding a helipad to the Essentia Health St. Mary's Hospital in Detroit Lakes. This project will reduce the impervious area on site and use a swale for the reduction in nutrients.

Proposed start date: Proposed completion date:

ADDITIONAL PERMITS

City of Detroit Lakes Permit Required X Permit Received Variance needed

Backe County Permit Required Permit Received Variance needed

Minnesota DNR Permit Required Permit Received Permit Received

Minnesota PCA Permit Required Permit Received

If variances are required, the approved conditions need to be included for permit approval.

*Additional permits may be required in addition to Pelican River Watershed District Permit
Please attach copies of all permits and variances received
PERMIT APPLICATION SUBMISSION REQUIREMENTS

1. Completed permit application, signed by the Property Owner, or authorized signatory
2. Duplicates of all drawings, site plans, and other required documents.
3. Application and Field Inspection fees according to the most recent schedule
4. Street map indicating project location

TERMS OF THE PERMIT

Applying for a permit issued through the Pelican River Watershed District (PRWD) in no way precludes obligation for permit application that may be required through OTHER governmental agencies. Any work performed prior to obtaining all required authorizations may be subject to Federal, State and/or administrative, civil, and/or criminal penalties. No liability shall be imposed on the District or any of its officers, agents or employees on official or personal grounds, on account of the granting of this permit, on account of any damage to any person or property resulting from any act or omission of the Permittee or any of its agents, employees or contractors relating to any matter hereunder. This permit shall not be construed as limiting any legal claim or right of action of the District against the Permittee, its agents, employees or contractors for the violation of, or failure to comply, with the provisions of the permit or applicable provisions of law.

When all items have been satisfactorily completed and the District determines the project meets the District’s Rule requirement, this permit will be issued. The permit may be picked up at the District office, or it will be mailed to the designated address. A copy of the approved permit will be filed with the applicable local governmental entity (Becker or Ottertail County, City of Detroit Lakes Zoning Department).

The permit will be valid for eighteen (18) months from the date of issuance, unless otherwise suspended or revoked. A permit may be extended at no charge, provided the property owner notifies the District in writing stating their reason for extension. Any plan changes, and related project documents must also be included in the extension application. The District must receive the extension application at least thirty (30) days prior to the permit’s expiration date as issued.

If changes are made to the permitted plans for this project, changes must be submitted to the District (in duplicate form) for review prior to installation or completion occurs. If changes to the original (permitted) plans are approved, an amended permit will then be issued.

This permit may be terminated by the Board of Managers without notice at any time deemed necessary for the management of the water resources of the District, or in the interest of public health and welfare, or for violation of any of the provision of this permit.

PERMIT APPLICATION AGREEMENT

“I understand that, as a Permittee, I am legally accountable to ensure compliance with the terms and conditions of the permit. I understand that I am not authorized to begin the project until I received the permit and the permit is posted as directed on the project site. If this project is modified, I will obtain approval by the District before I continue with the project. I authorize the District, and its agents, employees, officers, and contractors to enter the project site to perform any inspection or work authorized by the permit or any applicable law.”

“I certify that I have thoroughly read and understand the information on this permit application, including submittal requirements.”

Signature: ___________________________ Date: 11-22-12

(Property owner, or authorized signature through letter of authority)

ACTION BY THE PELICAN RIVER WATERSHED DISTRICT

The above application is APPROVED / DISAPPROVED this 20th day of 106 2018, by the

Pelican River Watershed District

By: ___________________________

Its: Administrator