

Shelby County, Kentucky Detention Analysis Checklist

Project Name: _____ **Date:** _____

The purpose of this checklist is to expedite and facilitate the review process. These are the minimum requirements for review by Shelby County. All items shall be checked as included or marked N/A. The omission of required information may be cause for rejection of the submittal without review.

- Cover Sheet with Professional Engineer's stamp, project title, owner name, and date
- Explanation of analysis with assumptions
- Analysis of downstream capacity limits
- Pre-developed drainage area map
- Post-developed drainage area map
- Time of concentration (Tc) supporting calculations – Pre and Post Development
- Runoff Coefficient or Curve Number Calculations – Pre-developed
- Runoff Coefficient or Curve Number Calculations – Post-developed
- Data for 2-, 10-, and 25-year peak flows for Pre-developed condition
- Data for 2-, 10-, and 25-year peak flows for Post-developed condition
- Direct release calculations
- Basin volume data for above peak flows (elevations and storage volume)
- Basin grading plan (include basin dimension, slopes, etc.)
- Basin outlet structure data and construction details
- Basin overflow w/ spillway dimensions, calculations
- Check 100-year analysis for overflow – upstream developed condition
- Basin Routing Data (stage, storage, peak elevation, peak inflow, peak outflow)
- Velocity dissipation calculation
- Summary of Drainage Analysis

The undersigned acknowledges by signature that these documents meet or exceed the design standards of Shelby County and that they were prepared under my supervision. The undersigned further acknowledges that to the best of my knowledge and belief, the products resulting from these documents will function as intended.

Engineer's Signature _____ Date _____

The undersigned acknowledges by signature that he/she is responsible for constructing and maintaining the improvements in accordance with Shelby County's ordinances and design criteria as submitted.

Developer's / Owner's Signature _____ Date _____

FORM MUST BE COMPLETED AND INCLUDED WITH ALL PLAN SUBMITTALS