



**City of San Diego  
Development Services**  
1222 First Ave, MS-501  
San Diego, CA 92101

# Permanent BMP Construction

Self Certification Form

**FORM  
DS-563**

October 2019

Date Prepared:		Project No./Approval No(s).	
Project Applicant:		Phone:	
Project Address:			
Project Name:	Subdivision Map No:	Block/Unit/Phase:	Lot(s):

The purpose of this form is to verify that the site improvements for the project, identified above, have been constructed in conformance with the approved Storm Water Standards Manual documents and drawings.

This form must be completed by the engineer and submitted prior to final inspection of the construction permit and occupancy of any buildings. Completion and submittal of this form is required for Priority Development Projects to comply with the City's storm water ordinances and applicable San Diego Regional Municipal Separate Storm Sewer System (MS4) Permit. Final inspection for occupancy and/or release of grading or public improvement bonds may be delayed if this form is not submitted and approved by the City of San Diego.

**Certification:**

As the professional in responsible charge for the design of the project, I certify under penalty of law that I have inspected all constructed Low Impact Development (LID) site design, source control, hydromodification (HMP), and treatment control BMPs required per the Storm Water Standards Manual; and that said BMPs have been constructed in compliance with the approved plans and all applicable specifications, permits, ordinances, and the San Diego Regional MS4 Permit.

I further certify that an operational test on the storm water BMP(s) was performed which determined that the facilities are functioning as intended per the approved Storm Water Quality Management Plan (SWQMP).

- FINAL
- \*Temporary (final certification must be submitted when all SWQMP approved BMPs are installed)
- HMP and/or Treatment Control BMP(s) were installed at the location(s) shown on the SWQMP and approved plans.

Site Inspection performed on: \_\_\_\_\_ Date(s)

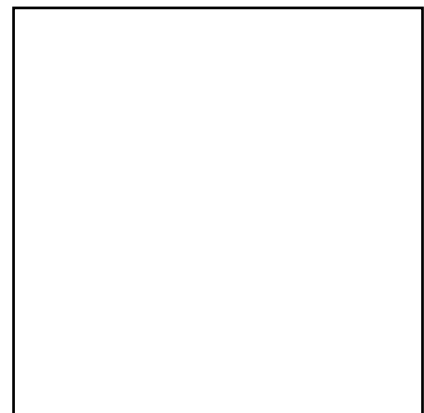
\*Exhibit(s) showing the DMA boundaries, treatment devices, and buildings to be occupied must be attached.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone No. \_\_\_\_\_

E-mail: \_\_\_\_\_



Engineer's Stamp