



## Stormwater Quality

### ESC Plan Information Sheet

**Project Name:** \_\_\_\_\_

**Project Location:** (address or major cross streets/arroyo) \_\_\_\_\_

\_\_\_\_\_

**Plan Preparer Information:**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (O) \_\_\_\_\_ (Cell (optional)) \_\_\_\_\_

e-Mail: \_\_\_\_\_

**Owner Information:**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

e-Mail: \_\_\_\_\_

**I am submitting the ESC plan to obtain approval for:**

\_\_\_\_ ESC Permit-Grading

\_\_\_\_ ESC Permit-Building Permit

\_\_\_\_ Work Order Construction Plans

Note: More than one item can be checked for a submittal

If you have questions, please contact Curtis Cherne, Stormwater Quality 924-3420, ccherne@cabq.gov

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