PLANS/PLATS ON FILE

FILE DESC: K-14/0044

PLANS/PLATS 1

FILE COPY

City of Albuquerque
P.O. BOX 1293 ALBUQUERQUE, NEW MEXICO 87103

ALBUQUERQUE NEW MEXICO 1706

KEN SCHULTZ
MAYOR

December 16, 1988

Armando Jimarez
1010 Orchard Place, NW
Albuquerque, New Mexico 87102

RE: HCH MEDICAL CLINIC ADDITION
(K-14/D44) DATED & RECEIVED DECEMBER 13, 1988

Dear Mr. Jimarez:

The referenced site will not need a drainage plan submitted for Hydrology sign-off for the following reasons.

1. The site is not in a 100 year flood zone.
2. The adjoining existing alley is paved.
3. The new area has minimum impact on downstream facilities.
4. Paving is not proposed for the site.
5. A field inspection did not indicate any apparent drainage problems.

Should you need further information regarding this project, please call me at 768-2650.

Cordially,

Carlos A. Montoya

Carlos A. Montoya, P.E.
City/County Floodplain Administrator

CAM/bsj
(WP+967)

DRAINAGE INFORMATION SHEET

PROJECT TITLE: HCH MEDICAL CLINIC ZONE ATLAS/DRNG. FILE #: K-14/D44

LEGAL DESCRIPTION: LOTS 11 & 12 BLOCK 40 N.M. TOWN ORIGINAL TOWNSITE

CITY ADDRESS: 410 6TH STREET SW, ALBUQUERQUE, 87102

ENGINEERING FIRM: _____ CONTACT: _____

ADDRESS: _____ PHONE: _____

OWNER: HEALTHCARE FOR THE HOMELESS, INC. CONTACT: RICHARD VIGLIANO, AGENT

ADDRESS: 215 CENTRAL AVE. N.W. PHONE: 242-2277

ARCHITECT: ARMANDO SUAREZ CORTEZ CONTACT: ARMANDO SUAREZ

ADDRESS: 1010 ORCHARD PL. N.W. PHONE: 766-5685

SURVEYOR: _____ CONTACT: _____

ADDRESS: _____ PHONE: _____

CONTRACTOR: _____ CONTACT: _____

ADDRESS: _____ PHONE: _____

RECEIVED
DEC 13 1988
HYDROLOGY SECTION

PRE-DESIGN MEETING:

____ YES

____ NO

____ COPY OF CONFERENCE RECAP SHEET PROVIDED

DRB NO. _____

EPC NO. _____

PROJ. NO. _____

TYPE OF SUBMITTAL:

____ DRAINAGE REPORT

____ DRAINAGE PLAN

____ CONCEPTUAL GRADING & DRAINAGE PLAN

____ GRADING PLAN

____ EROSION CONTROL PLAN

____ ENGINEER'S CERTIFICATION

X Field check

CHECK TYPE OF APPROVAL SOUGHT:

____ SKETCH PLAT APPROVAL

____ PRELIMINARY PLAT APPROVAL

____ SITE DEVELOPMENT PLAN APPROVAL

____ FINAL PLAT APPROVAL

X BUILDING PERMIT APPROVAL

____ FOUNDATION PERMIT APPROVAL

____ CERTIFICATE OF OCCUPANCY APPROVAL

____ ROUGH GRADING PERMIT APPROVAL

____ GRADING/PAVING PERMIT APPROVAL

____ OTHER _____ (SPECIFY)

DATE SUBMITTED: _____

BY: _____

PLAN/PLATS

ON

FILE