



IMPROVEMENT PLAN SUBMITTAL

FORMS IS-1 THRU IS-5

DIGITAL SUBMITTALS ARE REQUIRED

Submittals must be made digitally and adhere to the City's [Digital Submittal Standards](#). Staff will review for compliance and completeness prior to initiating each review cycle. Obtain prior approval for deviations and omissions to ensure prompt intake. Staff will advise of any need for printed plans and documents. Please contact engineeringdivision@san-marcos.net and/or the assigned staff with questions.

IMPROVEMENT PLAN INTAKE SCREENING

Prior to the acceptance of the initial submittal, staff will screen the submittal items which may take up to five (5) business days from the date of applicant's submittal. Staff will notify the applicant regarding the completeness of the submittal, submittal acceptance, and commencement date for the plan review.

COORDINATION OF REVIEW WITH OTHER AGENCIES OR DISTRICTS

The applicant shall coordinate with servicing water and sewer agency and other applicable agencies to ensure timely processing of the plan review. Contact City staff to identify the project's servicing water and sewer agency. The applicant shall submit to the water and sewer agency first, then provide satisfactory submittal documentation with the initial plan submittal to the City. The servicing water and sewer agency must approve the plans prior to City approval.

IMPROVEMENT PLAN SUBMITTAL CHECKLISTS & APPLICATION

Checklists are provided as a general guide for typical items required at Improvement plan review submittal:

FORM IS-1: [Improvement Plan Application](#)

FORM IS-2: [Plancheck Submittal Checklist](#)

FORM IS-3: [Mylar Submittal Checklist](#)

FORM IS-4: [Inspection Package Submittal Checklist](#)

FORM IS-5: [Inspection Contact Form](#)

HELPFUL LINKS

[Fee Schedule](#)

[Digital Submittal Standards \(Form DS-1\)](#)

[Right-of-Way Permit Application \(Forms RS-1 thru RS-4\)](#)

[Improvement Plan Design Standards \(Form IS-6\)](#)



IMPROVEMENT PLAN APPLICATION

FORM IS-1

Page 1 of 2

Additional contact information and parcel information may be placed as an attachment to this application.

DEVELOPER/APPLICANT INFORMATION

DEVELOPER NAME:

COMPANY:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL:

PROPERTY OWNER INFORMATION (if different than Developer/Applicant)

OWNER NAME:

COMPANY:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL:

ENGINEER INFORMATION

ENGINEER NAME:

COMPANY:

LICENSE #:

ADDRESS:

NUMBER

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PHONE #:

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EMAIL:

PROJECT INFORMATION

PROJECT NAME:

PROJECT LOCATION:

PLANNING PERMIT NUMBER:

COUNCIL/PLANNING COMMISSION/ADMINISTRATIVE RESOLUTION OF APPROVAL NO.:

SCOPE

OF

WORK:

PDP SWQMP?

YES

NO

SWPPP?

YES

NO

**SIGNATURE & ACKNOWLEDGEMENT**

Projects that successfully reach approval within three planchecks routinely demonstrate the following characteristics:

- They include a complete and thorough initial submittal and subsequent resubmittals;
- They provide comprehensive engineering design and all supporting information;
- They maintain a consistent design throughout the review process, avoiding changes;
- They thoughtfully and completely address all City staff review comments; and
- They initiate timely plan review and coordination with the servicing water and sewer district and/or other agencies.

I understand that if my project does not achieve one or more of these characteristics, it is at an increased risk of requiring more than three plan review cycles to reach approval.

Furthermore, I confirm that I have read and understood the instructions provided and that all information provided is correct and complete. I agree to comply with all federal, state, and city laws, ordinances, regulations, and policies relating to the work being performed as part of this permit. I understand that submitting an application does not guarantee permit approval.

By submitting this application, I acknowledge and understand the foregoing:

Signature of Developer*

Date

If Developer is not the property owner, separate letter of permission signed by the Owner must be provided to allow Developer to sign.



IMPROVEMENT PLAN SUBMITTAL CHECKLIST

PLANCHECK SUBMITTAL CHECKLIST

FORM IS-2

Required if Checked	Submittal Items	Accepted by City	
<input type="checkbox"/>	1 Pay review fee deposit with initial submittal. Pay a deposit to reimburse City costs for any consultant expert third-party reviews, as applicable.	<input type="checkbox"/>	
<input type="checkbox"/>	2 Completed Street Improvement Application Form IS-1 including Improvement Plan Submittal Checklist Form IS-2	<input type="checkbox"/>	
<input type="checkbox"/>	3 Engineer of Work's transmittal: detail all submittal items and quantities	<input type="checkbox"/>	
<input type="checkbox"/>	4 Preliminary geotechnical report prepared, signed, and sealed by the geotechnical engineer	<input type="checkbox"/>	
<input type="checkbox"/>	5 Hydrology/hydraulics report, including computer modeling files, signed and sealed by the Engineer of Work	<input type="checkbox"/>	
<input type="checkbox"/>	6 Engineer's cost Estimate Form UP-2	<input type="checkbox"/>	
<input type="checkbox"/>	7 Final Conditions of Approval letter or entitlement resolution	<input type="checkbox"/>	
<input type="checkbox"/>	8 Approved entitlement exhibits (i.e., TSM, TPM, SDP)	<input type="checkbox"/>	
<input type="checkbox"/>	9 Form J-1 : Applicability of Storm Water BMP Requirements	<input type="checkbox"/>	
<input type="checkbox"/>	10 Storm Water Quality Management Plan (SWQMP) per Form J-1 based on City template	<input type="checkbox"/>	
<input type="checkbox"/>	11 Storm Water Pollution Prevention Plan (SWPPP)	<input type="checkbox"/>	
<input type="checkbox"/>	12 Proof of review submittal (receipt or correspondence) to water & sewer district	<input type="checkbox"/>	
<input type="checkbox"/>	13 Details and calculations for non-standard improvements, such as retaining walls and footings (additional review fee may be required)	<input type="checkbox"/>	
<input type="checkbox"/>	14 Improvement plan per Digital Submittal Standards , including CFD Landscaping, Signing & Striping, Erosion Control, and Stormwater Quality Management sheets at 100% design level	<input type="checkbox"/>	
<input type="checkbox"/>	15 Record plans, including surrounding maps, grading, and improvements affecting the site	<input type="checkbox"/>	
<input type="checkbox"/>	16 Other as specified by City:	<input type="checkbox"/>	
Items Required Only After Initial Submittal			
<input type="checkbox"/>	17 Resubmittal response: Engineer of Work's written response itemizing responses to each review comment and identifying any design features that have significantly changed.	<input type="checkbox"/>	
<input type="checkbox"/>	18 Previous City review letter with signed acknowledgement by developer	<input type="checkbox"/>	
<input type="checkbox"/>	19 Additional plan check fees equal to 33% of the initial improvement plan check fee due at the 4 th and each subsequent plan review	<input type="checkbox"/>	
<input type="checkbox"/>	20 Satisfaction of Community Facilities District(s) annexation requirements	<input type="checkbox"/>	
<input type="checkbox"/>	21 Exhibits A, B, C, D for Storm Water Management Facilities Maintenance Agreement	<input type="checkbox"/>	



IMPROVEMENT PLAN SUBMITTAL CHECKLIST

MYLAR SUBMITTAL REQUIREMENTS

FORM IS-3

Submit mylar plans only once City approves plans as noted. The mylar package shall include the items indicated below.

Required if Checked	Submittal Items	Accepted by City	
<input type="checkbox"/>	1 Resubmittal response: Engineer of Work's written response itemizing responses to each review comment and identifying any design features that have significantly changed.	<input type="checkbox"/>	
<input type="checkbox"/>	2 Engineer of Work's transmittal: detail all submittal items and quantities	<input type="checkbox"/>	
<input type="checkbox"/>	3 Original of "Storm Water Management Facilities Maintenance Agreement" with ink signatures & notary acknowledgements. <i>Submitted in print (not electronically).</i>	<input type="checkbox"/>	
<input type="checkbox"/>	4 Original of any dedications, easements, or other required agreements with ink signatures & notary acknowledgements. <i>Submitted in print (not electronically).</i>	<input type="checkbox"/>	
<input type="checkbox"/>	5 Fully signed and sealed improvement plan mylars	<input type="checkbox"/>	
<input type="checkbox"/>	6 Complete digital submittal including final CAD files. Refer to City's Digital Submittal Standards	<input type="checkbox"/>	
<input type="checkbox"/>	7 Single complete PDF with embedded signatures & seals: Hydrology and hydraulics report	<input type="checkbox"/>	
<input type="checkbox"/>	8 Single complete PDF with embedded signatures & seals: Geotechnical report	<input type="checkbox"/>	
<input type="checkbox"/>	9 Single complete PDF with embedded signatures & seals: SWQMP	<input type="checkbox"/>	
<input type="checkbox"/>	10 Single complete PDF with embedded signatures & seals: SWPPP with SMARTS registration WDID	<input type="checkbox"/>	
<input type="checkbox"/>	11 Complete PDF's of all other approved reports, calculations, and documents. Adhere to formatting and size reduction protocols. Final report submittals shall be one complete file, not parsed into sections, regardless of final file size	<input type="checkbox"/>	
<input type="checkbox"/>	12 Additional plan check fees equal to 33% of the initial improvement plan check fee. (Applicable to the 4 th plan check and each review beyond the 4 th)	<input type="checkbox"/>	
<input type="checkbox"/>	13 Securities and Agreements with ink signatures & notary acknowledgment	<input type="checkbox"/>	
<input type="checkbox"/>	14 Right-of-Way Permit Application and inspection fees as per City-issued bond and fee letter	<input type="checkbox"/>	
<input type="checkbox"/>	15 Construction schedule including approximate start date for inspection scheduling	<input type="checkbox"/>	
<input type="checkbox"/>	16 Other as specified by City:	<input type="checkbox"/>	



IMPROVEMENT PLAN SUBMITTAL CHECKLIST

INSPECTION PACKAGE REQUIREMENTS

FORM IS-4

Submit the Inspection Package only once City requests it. The Inspection Package shall include the items indicated below. The City-approved mylars will be available for checkout at City Hall for preparation of the below package.

Required if Checked	Submittal Items	Accepted by City	
<input type="checkbox"/>	1 Inspection Package Requirements checklist Form IS-4	<input type="checkbox"/>	
<input type="checkbox"/>	2 One (1) copy of Resolution of Conditions of Approval with its Notice of Decision	<input type="checkbox"/>	
<input type="checkbox"/>	3 Completed Inspection Contact Form IS-5	<input type="checkbox"/>	
<input type="checkbox"/>	4 Three (3) full size printed sets of City approved Improvement Plans <u>NOTE:</u> If improvement plans include CFD maintained landscaping, provide a total of Five (5) full size printed sets of City approved Improvement Plans	<input type="checkbox"/>	
<input type="checkbox"/>	5 One (1) copy of City reviewed geotechnical report (for large reports, a copy of the conclusions/recommendations of said report)	<input type="checkbox"/>	
<input type="checkbox"/>	6 PDF copy and one (1) full size printed set of water and sewer district improvement plans (if public water and sewer are not part of City improvement plans)	<input type="checkbox"/>	
<input type="checkbox"/>	7 Complete Right-of-Way Permit Application with fees paid in full	<input type="checkbox"/>	
<input type="checkbox"/>	8 Approved improvement plan mylars	<input type="checkbox"/>	
<input type="checkbox"/>	9 All required non-city issued permits (i.e. Wildlife resource agencies)	<input type="checkbox"/>	
<input type="checkbox"/>	10 Other as specified by City:	<input type="checkbox"/>	



INSPECTION CONTACT FORM

FORM IS-5

DEVELOPER INFORMATION

DEVELOPER NAME:

COMPANY:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL:

PROPERTY OWNER INFORMATION (if different than Developer)

OWNER NAME:

COMPANY:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL:

ENGINEER INFORMATION

ENGINEER NAME:

COMPANY:

LICENSE #:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL:

GEOTECHNICAL ENGINEER INFORMATION

ENGINEER NAME:

COMPANY:

LICENSE #:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL:

SURVEYOR INFORMATION

SURVEYOR NAME:

COMPANY:

LICENSE #:

ADDRESS:

NUMBER

STREET

STE

CITY

STATE

ZIP CODE

PHONE #:

CELL PHONE #:

EMAIL: