

Date (submitted): _____

City of Buford
Runoff Reduction Infeasibility (RRI) Form for
Determination of Infeasibility

Design Professional Primary Contact (Name/Email/Phone): _____

Description of Site/Land Development Application Number: _____

Address: _____

Size (acres): _____

Maximum Practicable Runoff Reduction Volume*: _____

**If any of the stormwater runoff volume generated by the first 1.0" of rainfall cannot be reduced or retained on the site, due to site characteristics or constraints, the remaining volume shall be increased by a multiplier of 1.2 and shall be intercepted and treated in one or more best management practices that provide at least an 80 percent reduction in total suspended solids.*

GENERAL SUPPORTING DOCUMENTATION

All General Supporting Documentation must be included with this RRI Form for the submittal for a Determination of Infeasibility to be considered complete. Please check each item below to confirm it has been included in the submittal package.

- ☐ Stormwater Concept Plan that has been developed based on site analysis, and natural resources inventory (including impracticability) in accordance with Section 2.4.2.5 of the GSMM
 - ☐ GSMM Stormwater Quality Site Development Review Tool for the Stormwater Concept Plan
 - ☐ Please include justification that the site cannot accommodate best management practices that rely on evapotranspiration and reuse such as rainwater harvesting or green roofs
-

SITE CONDITION APPLICABILITY(descriptions are in *Policy on Practicability Analysis for Runoff Reduction*)

Please check each applicable item below and confirm the supporting documentation has been included in the submittal for a Determination of Infeasibility.

Site Condition	Supporting Documentation
☐ Soil Infiltration Rate	Infiltration test(s), Soil Boring Log(s), and Report of results as interpreted by a Professional Engineer, Professional Geologist, or Soil Scientist licensed in Georgia
☐ Water Table	Soil Boring Log(s) and Report with results of the seasonal high-water table assessment as interpreted by a Professional Engineer, Professional Geologist, or Soil Scientist licensed in Georgia
☐ Bedrock	Soil Boring Log(s) and Report with results of the shallow bedrock assessment as interpreted by a Professional Engineer, Professional Geologist, or Soil Scientist licensed in Georgia
☐ Extreme Topography	Site survey showing 50% of the site is steeper than 3:1 slopes as interpreted by a Professional Engineer or Land Surveyor licensed in Georgia AND Stormwater Concept Plan showing the proposed post-development condition will not change from the site survey
☐ Karst Topography	Report developed by a Professional Engineer, Professional Geologist, or Soil Scientist licensed in Georgia
☐ Hotspots/ Contamination	Phase I Environmental Assessment Report
☐ Historic Resources	Documentation of the NAHRGIS listing OR Report of assessment from a Preservation Professional (including Archaeologist, Architectural Historian, Historian, Historic Preservationist, or Historic Preservation Planner)
☐ Site Constraints	Site Plan identifying all development requirements (e.g. zoning side/front setbacks, build-to-lines, stream buffers, floodplains, septic fields) that are creating irreconcilable conflicts with on-site runoff reduction
☐ Economic Hardship*	An estimated cost comparison of proposed runoff reduction practices compared to the proposed water quality practices must be included to demonstrate an economic hardship and must show the cost of providing runoff reduction is a minimum of three times greater than the cost of providing water quality practices

* *Note: A Determination of Infeasibility cannot be granted solely for economic hardship and must be present with another site condition. Additionally, a Determination of Infeasibility for economic hardship may only be allowed for up to 50% runoff reduction volume.*

STORMWATER RUNOFF QUALITY/ REDUCTION SUMMARY

Maximum Practicable Runoff Reduction Volume*: _____

Remainder of Volume treated by Water Quality Best Management Practice: _____

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Design Professional Printed Name _____

Design Professional Signature _____

FOR CITY OF BUFORD USE ONLY

☐ APPROVED

☐ APPROVED with
conditions _____

☐ DENIED _____

Reviewer: _____

(Print Name)

(Signature)

(Date)