

**HYDROLOGIC CRITERIA AND DRAINAGE MANUAL**  
**DRAINAGE STUDY INFORMATION FORM**

Name of Development: ER at Skye Hills Date: 2/13/2024  
 Location of Development: a) Descriptive (Cross Streets) North/South: Hualapai Way  
 East/West: Centennial Parkway  
 b) Section: 19 Township: 19S Range: 60E  
 c) APN: 125-19-401-002

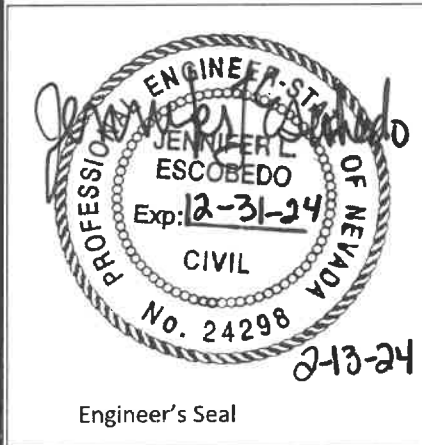
Name of Owner: Sunrise Mountainview Hospital Inc  
 Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
 Address: \_\_\_\_\_

Contact Person-Name: Jennifer Escobedo Telephone No.: 702-768-0453  
 \* E-Mail Address: jescobedo@civil360lv.com Fax No.: N/A  
 Firm: CIVIL 360 Planning & Engineering  
 Address: 6490 W Desert Inn Rd Las Vegas, NV 89146

Type of Land Development/Land Disturbance Process:

<input type="checkbox"/> Rezoning	<input type="checkbox"/> Subdivision Map	<input type="checkbox"/> Clearing and Grading Only
<input type="checkbox"/> Parcel Map	<input type="checkbox"/> Planned Unit Development	<input type="checkbox"/> Other (Please specify below)
<input type="checkbox"/> Large Parcel Map	<input checked="" type="checkbox"/> Building Permit	

- Total Owned Land Area: At Site: ±/- 2.02 Ac Being Developed/Disturbed: ±/- 2.02 Ac
- Is a portion or all of the subject property located in a designated FEMA Flood Hazard Area?  Yes\*\*  No
- Is the property bordered or crossed by an existing or proposed Clark County Regional Flood Control District Master Planned Facility?  Yes\*\*  No
- Proposed type of development (Residential, Commercial, Etc.): Commercial
- Approximate upstream land area which drains to the subject site: \_\_\_\_\_
- Has the site drainage been evaluated in the past?  YES  NO If yes, please identify documentation: L23-01007
- If known, please briefly identify the proposed discharge point(s) of runoff from the site: \_\_\_\_\_
- Briefly describe your proposed schedule for the subject project: As soon as possible



Submit this form as part of the required drainage study to the local entity which has jurisdiction over the subject property. This form may provide sufficient information to serve as the Conceptual Drainage Study.

\*New Required Field  
 \*\*Review and concurrence of the Clark County Regional Flood Control District is required.

Revision	Date

Local Entity File No. \_\_\_\_\_

REFERENCE: \_\_\_\_\_ STANDARD FORM 1