

SOIL MEDIA SPECIFICATIONS

TEXTURE AND COMPOSITION (BY VOLUME):

SOIL MEDIA SHOULD CONSIST OF A LOAMY SAND CONFORMING TO THE FOLLOWING SPECIFICATIONS:

- 65% SAND
- 20% SANDY LOAM
- 15% COMPOST

ORGANIC MATTER MATERIAL:

MAXIMUM 5% BY WEIGHT IN OVERALL SOIL MEDIA. ORGANIC MATTER SHOULD BE BASED FROM VEGETATION-BASED FEEDSTOCK AND INCLUDE NO ANIMAL MANURE OR BYPRODUCTS.

INFILTRATION RATES:

5 IN/HR INFILTRATION RATE FOR FLOW-BASED SUSMP METHOD (1-6 IN/HR FOR ALTERNATIVE DESIGNS, AS APPROVED BY LOCAL JURISDICTION.)

pH:

6 TO 8

CATION EXCHANGE CAPACITY (CEC):

GREATER THAN 5 MILLIEQUIVALENTS (MEQ)/100 GRAMS SOIL

PHOSPHORUS:

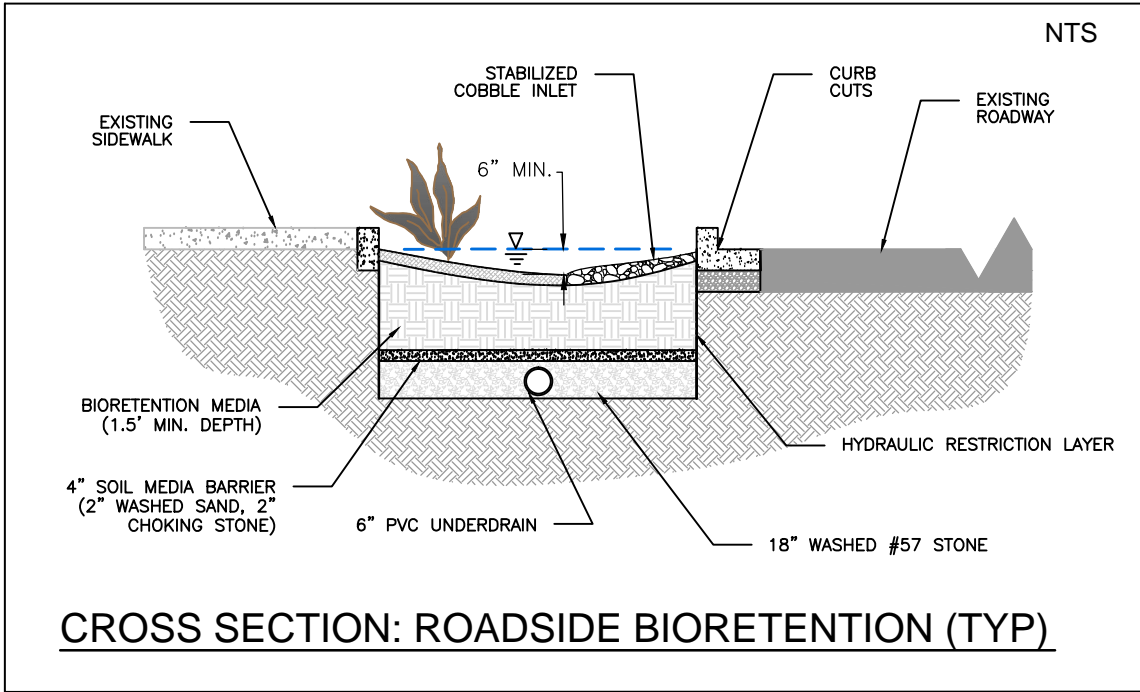
TOTAL PHOSPHORUS SHOULD NOT EXCEED 15 PPM

REFER TO THE COUNTY OF SAN DIEGO LID HANDBOOK APPENDIX G FOR FURTHER SOIL MEDIA SPECIFICATIONS.

VEGETATION SPECIFICATIONS

FOR BIORETENTION TO FUNCTION PROPERLY AS STORMWATER TREATMENT AND BLEND INTO THE LANDSCAPING, VEGETATION SELECTION IS CRUCIAL. APPROPRIATE VEGETATION WILL HAVE THE FOLLOWING CHARACTERISTICS:

1. PLANT MATERIALS MUST BE TOLERANT OF SUMMER DROUGHT, PONDING FLUCTUATIONS, AND SATURATED SOIL CONDITIONS FOR 10 TO 48 HOURS.
2. IF PLANT SPACING ALLOWS, IT IS RECOMMENDED THAT A MINIMUM OF THREE TREE SPECIES, THREE SHRUB SPECIES, AND THREE HERBACEOUS GROUNDCOVER SPECIES BE INCORPORATED TO PROTECT AGAINST FACILITY FAILURE FROM DISEASE AND INSECT INFESTATIONS OF A SINGLE SPECIES. PLANT ROOTING DEPTHS MUST NOT DAMAGE THE UNDERDRAIN, IF PRESENT. SLOTTED OR PERFORATED UNDERDRAIN PIPE MUST BE MORE THAN 5 FEET FROM TREE LOCATIONS (IF SPACE ALLOWS).
3. NATIVE PLANT SPECIES OR HARDY CULTIVARS THAT ARE NOT INVASIVE AND DO NOT REQUIRE CHEMICAL INPUTS ARE RECOMMENDED TO BE USED TO THE MAXIMUM EXTENT PRACTICABLE.
4. SHADE TREES SHOULD BE FREE OF BRANCHES BELOW 1/3 THEIR TOTAL HEIGHT.



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|---------------------------|--------------|-----------|---------------|
| CONSULTANT NAME | | | |
| STREET NUMBER AND ADDRESS | | | |
| SAN DIEGO COUNTY | | | |
| BIORETENTION | | | |
| % SUBMITTAL | PROJECT NO.: | DATE: | |
| DRWN. BY: | DSGN. BY: | CHKD. BY: | SHEET NO.: OF |