



Stormwater Enterprise Fund Credit Application

CONTACT INFORMATION

Name of Property Owner or Occupant
(Last, first, middle initial)

Date

Applicant Address, City, ST, ZIP Code

Tax Map Number(s) and parcel I.D. Number

Primary phone number | Other phone number

Property Street Address, City, ST, ZIP Code

Primary phone number | Other phone number

Email address

Instructions:

Fill out this form completely. One application must be submitted for each separate location. Multiple stormwater controls may be included in the application for a single property location. Please ensure all stormwater management facilities are in proper state of repair and maintained. Attach all appropriate documentation to support this request. Documentation shall include:

1. Site plan with stormwater facilities and contributing drainage areas.
2. Descriptions of stormwater control facilities.
3. Documentation that the stormwater control facilities meet the criteria for stormwater enterprise fund credit. Which may include:
 - a. Stormwater facility survey and calculations showing the stormwater facilities are currently meeting quantity and/or quality requirements. For recently constructed facilities that required an as-built survey, the as-built survey of the constructed stormwater facilities with associated calculations.
 - b. Recorded or Proposed Maintenance Covenant.

Is this a renewal?

YES NO

Applicable Credit – check appropriate credit(s)

| | | | | | |
|---------|------------|---------------|-------------|-------------------------------|-------------|
| 1 YEAR | _____ (5%) | 25 YEAR | _____ (5%) | CHANNEL PROTECTION COMPLIANCE | _____ (5%) |
| 2 YEAR | _____ (5%) | 100 YEAR | _____ (5%) | OTHER: (describe below) | (_____ %) |
| 10 YEAR | _____ (5%) | WATER QUALITY | _____ (10%) | | |

Water Quantity and Quality BMP(s) – attach additional sheets if needed

| | | | |
|-------|-------|---|-------|
| BMP 1 | _____ | Impervious Surface Treated (ft ²) | _____ |
| BMP 2 | _____ | Impervious Surface Treated (ft ²) | _____ |
| BMP 3 | _____ | Impervious Surface Treated (ft ²) | _____ |

For Administrative Use Only:

| | |
|--------------|--------------------|
| Action taken | Date received |
| | Approval signature |