



# Stormwater Enterprise Fund Credit Application Form

Town of Christiansburg  
100 East Main St  
Christiansburg, VA 24073

## CONTACT INFORMATION

_____	_____
Name of Property Owner or Occupant (Last, first, middle initial)	Date
_____	_____
Tax Map Number(s) and parcel I.D. Number	_____
_____	_____
Applicant Address, City, ST, ZIP Code	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.

<b>Is this a renewal?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------------------------------------------------------------------------------

### Applicable Credit – check appropriate credit(s)

1 YEAR _____ (5%)	25 YEAR _____ (5%)	CHANNEL PROTECTION COMPLIANCE _____ (5%)
2 YEAR _____ (5%)	100 YEAR _____ (5%)	OTHER: <i>(describe below)</i> ( _____ % )
10 YEAR _____ (5%)	WATER QUALITY _____ (10%)	

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

BMP 1 _____	Impervious Surface Treated (ft <sup>2</sup> ) _____
BMP 2 _____	Impervious Surface Treated (ft <sup>2</sup> ) _____
BMP 3 _____	Impervious Surface Treated (ft <sup>2</sup> ) _____

### For Administrative Use Only:

Action taken	Date received
	Approval signature