

Date Received: \_\_\_\_\_

Credit Application ID: \_\_\_\_\_



City of Harrisonburg, Virginia  
Department of Public Works  
320 East Mosby Road  
Harrisonburg, VA 22801  
540-434-5928  
stormwater@harrisonburgva.gov

## Stormwater Utility Fee Credit Re-Application

### General Information:

#### Parcel Information

Tax Map Parcel Number(s): \_\_\_\_\_

Parcel Street Address: \_\_\_\_\_

Residential     Non-Residential

#### Owner Information

Owner Name (Last, First, M.I. or Business): \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

If Business, Contact Name (Last, First, M.I.): \_\_\_\_\_

Phone Number (w/Area Code): (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

### Credit Information:

1. Since the last application/re-application, has there been any new construction surrounding the stormwater BMP(s)?

No     Yes (If yes, please explain):

2. Since the last application/re-application, have any changes been made to the stormwater BMP(s)? Be sure to document all maintenance, landscaping, and repairs on the Maintenance Record form.

No     Yes (If yes, please explain):

3. Has any new impervious area been added or removed on your parcel?

No  Yes (If yes, please explain):

**Required Attachments:**

**Photographs of each stormwater BMP within 60 days of re-application**

Date Photos were taken: \_\_\_\_\_

If submitting photos of more than one stormwater BMP, label each photo with the type of BMP installed.

**For Non-Residential, Category A or B stormwater BMP(s)**, provide a copy of the Inspection Form that has been certified by a Professional Engineer. See the City's Design & Construction Standards Manual, Appendix J, <http://www.harrisonburgva.gov/dcs>. The Stormwater BMP Post-Construction Inspection Policy in Appendix J references the required Inspection Form.

**Signature of Agreement**

**I hereby certify the above information to be true and correct to the best of my knowledge.**

\_\_\_\_\_  
Owner Printed Name

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

**FOR CITY USE ONLY**

Application administratively complete  Yes  No  
Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Re-application Status Determination  Approved  Denied  
Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Contacted  Yes  
Contacted by: \_\_\_\_\_ Date: \_\_\_\_\_