

TOWN OF BELLINGHAM

STORMWATER FEE ADJUSTMENT APPLICATION

APPLICANT INFORMATION:**DATE:** _____

APPLICANT: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

CELL PHONE: _____ EMAIL: _____

PROPERTY INFORMATION:

STREET ADDRESS: _____

ASSESSORS: MAP: _____ PARCEL: _____

CURRENT IMPERVIOUS AREA: _____ SQ. FT./ CURRENT ERU: _____

CORRECTED IMPERVIOUS AREA: _____ SQ. FT.

MEANS BY WHICH THE CORRECTED AREA WAS DETERMINED: _____

I, _____, am the owner(s)* of the parcel noted above.

PRINT NAME

The information I have submitted is true to the best of my knowledge.

Signed: _____ Date: _____

*Submit documentation confirming the authority to sign if not a sole owner(s).

XXXXXX

SHADED AREA TO BE COMPLETED BY THE DPW

XXXXXX

APPLICATION RECEIVED BY THE DPW

BY: _____ Date: _____