

APPLICATION: STORMWATER UTILITY MITIGATION CREDIT

APPLICANT INFORMATION

Full Name: _____
Last First M.I. Date

Utility Account No.: _____

Fill out the information in the boxes below depending on if you are applying for a single parcel or a group of parcels. If you have multiple utility accounts, a separate form must be submitted for each separate account.

SINGLE parcels under one utility account number

Parcel Address: _____
Street Address Apartment/Unit #

City State ZIP Code

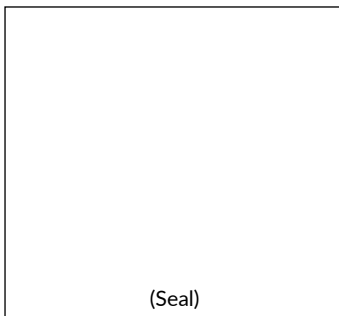
MULTIPLE parcels under one utility account number

Name: _____
Name of Community/Subdivision/Development

Account Address: _____
Street Address ZIP Code

- 1) Do you currently receive a mitigation credit? Yes No
- 2) Does this parcel already have a stormwater treatment facility? Yes No
- a) If known, what date was your system installed/built? _____
Date

I HEARBY CERTIFY THAT THE CALCULATIONS AND MEASUREMENTS SHOWN HEREON AS PART OF THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF FLORIDA.



Signature

Date

Printed Name

License No.



Engineering & Capital Improvements Department
One 4th St. N.
727-893-7238

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STORMWATER TREATMENT FACILITY DOCUMENTATION

Utility Account No.: _____

Total Eligible Mitigation Credit Calculated: _____

INCLUDE WITH YOUR APPLICATION SUBMISSION:

Completed Application (ECID_FORM_001)

Page 1: • If new application, must be signed and sealed by Florida Professional Engineer

- Make sure your Utility Account Number is correct

Page 2: • Ensure all required documentation is attached after this page, including calculations, design plans, and/or inspection reports

Calculations - Stormwater Mitigation Credit Calculator (ECID_FORM_002)

- Must also include separate stormwater treatment capacity calculations with measurements, and be signed by a Professional Engineer

Site Plan and Stormwater Design Plans

- 11"x17" format preferred
- Must be legible and show complete stormwater system and parcel(s) boundary

Inspection Checklist (ECID_FORM_003)

- Include Inspection Checklist with most recent inspection reports showing entire system is operating as per built plans
- Photo documentation of stormwater system included with Inspection Checklist is preferred

HOW TO SUBMIT COMPLETED APPLICATION AND REQUIRED DOCUMENTATION:

Email to stormwater.credits@stpete.org

or mail to:

Engineering & Capital Improvements Department

P.O. Box 2842, St. Petersburg, FL 33731-2842

FOR OFFICIAL USE ONLY

Reviewed by: _____

Credit Approved? YES, WITHOUT CHANGES YES, BUT WITH ADJUSTMENTS NO

Approved Credit Amount? _____ %
Total

Comments: _____
