City of Waupun Storm Water Utility: Credit Application Form

Form 1 – Storm Water Service Charge Credit Application

Credits Applied for (check all that apply): ☑ Riparian ☑ Flow Control ☑ Best Management (Non-residential) ☑ Best Management (Residential)

Applicant Information (Financially Responsible Entity) (Please print or type)
Name: ________________________________________________________________________________
Address: ____________________________________________________________________________
City: ______________________ State: ___________ Zip Code: __________________________
Contact Person: __________________ Email: __________________________ Telephone: (___)___-_____

Property Owner Information (If Different from Above):
Name: ________________________________________________________________________________
Address: ____________________________________________________________________________
City: ______________________ State: ___________ Zip Code: __________________________

Property Information:
Property Location/Address: ___________________________________________________________
Parcel Identification Number (PIN): __________________________ Property Size (SF/Acre): ________
Receiving Water’s Name (if applicable): ____________________ Impervious Area (SF): ___________
Brief Description of Storm Water Facilities at Location (if applicable): _________________________
__________________________________________________________________________________

Plan Review Information:
Has this project and its storm water calculations been previously approved by the city?  Yes  No
If Yes, date of final approval of plan and calculations: __________________________
(If no copy is on file, city will notify Applicant to request a copy.)
If No, provide copies of as-built plans and calculations showing the project meets minimum city
requirements.

Please indicate the review information that you are attaching to this application:
☑ Narratives ☑ Site Plans ☑ Survey Plat with Topography
☑ Runoff Calculations ☑ Routing Calculations ☑ Stage/Storage/Discharge Tables
☑ Outlet Structure Details ☑ As-Built Plans ☑ Maintenance Manual

Certifications:
The above information is true and correct to the best of my knowledge and belief. (This form must be
signed by the financially responsible person if an individual, or if not an individual, by an officer, director,
partner, or registered agent with authority to execute instruments for the financially responsible person).  I
agree to provide corrected information should there be any change in the information provided herein.

______________________________      ______________________________________
Type or print name                                   Title or Authority

______________________________      ______________________________________
Signature                                                   Date

The following certification is required for approval of all credits for which a certified technical
submission was required: The above information and the information on Form 2 was prepared either by
or under the supervision of myself as the qualified professional and is true and correct to the best of my
knowledge and belief.

______________________________      _____________________       (___)____-_____
Type or print name                                   Professional License Type and Number

______________________________      _____________________       (___)____-_____
Signature                                                   Date                                         Telephone
Form 2 – Storm Water Service Charge Credit Application

(Form 1 must accompany this application form)

Riparian Property Credit
1. Total Gross Impervious Area: ___________________________ (sf)
2. Impervious Area Draining Directly to Water Body: ______________ (sf)
3. Percent of Area Draining Directly to Water Body (2/1*100): _____________________ (%)
4. Riparian Property Credit (3/100*75%) ________________________ (%)
   (Maximum is 75%)

Post Development Flow Control
All storm water management requirements were met at the time of construction: ☒ Yes ☒ No
10-year
5. Percent of site’s impervious area draining to Flow Control measure: _____________ (%)
6. Post-Developed 10-year flow without management: ________________________ (cfs)
7. Post-Developed year flow with management: __________________________ (cfs)
8. Reduction of Flow Provided (6-7): __________________________ (cfs)
9. Percent Reduction (8/6*100): ____________________________________ (%)
10. Flow Control Credit ((5*9)/10,000*75%): __________________________ (%)
    (Maximum is 75%)

Best Management Practice Credit
BMP #1: Description of BMP
BMP #2: Description of BMP
   Check here ☐ if you attach additional BMP’s for consideration.
   (Plans, specification, calculations, or other supporting data should be supplied for each BMP.)
11. Best Management Practice Credit: ________________________________ (%)
    (Maximum is 75%)

Credit Summary
Riparian Property Credit: (4) ____________________________ % (Maximum is 75%)
Post Development Flow Control Credit: (10) _________________________ % (Maximum is 75%)
Best Management Practice Credit: (11) __________________________ % (Maximum is 75%)
Total Annual Storm Water Credit: (4+10+11) _______________________% (Maximum is 75%)

☒ Credit Application Approved Subject to Waupun Credit Policy
☒ Credit Application Not Approved

______________________________
Director of Public Works (or designee)(Print Name)

______________________________
Director of Public Works (or designee)(Sign Name)

______________________________
Date