

**CITY OF WINTER HAVEN
STORMWATER UTILITY FEE CREDIT APPLICATION**

Name(s) of Property Owner(s): _____

Property(ies) Requesting Exemption: _____
If Multiple Addresses,
Attach Listing. _____

Type of Business/Property Use: _____

Is on-site storm drain system publicly maintained? Yes: _____ No: _____

Billing Address (If Different): _____
If Multiple Addresses,
Attach Listing. _____

Property Parcel I.D.# _____ Name of Development _____

Utility Account #: _____

Phone Number(s): _____

Signature(s) & Date: _____
Signature Date
Signature Date

TYPE OF CREDIT REQUESTED (Please Check One)

Documentation must be provided for any of the following.

X	Type of Program/Practice	Fee Reduction	Permit # (if applicable)	Date of Permit Issuance
X	Southwest Florida Water Management District Surface Water Mangement Permit.	60%		
	City of Winter Haven Redevelopment one-half inch of runoff.	40%		
	City of Winter Haven Redevelopment one-quarter inch of runoff.	20%		
	Other State permitting programs for water quality control.	15%		
	Parking lot/street sweeping involving commercial sweeping company/additional best management practices including raingardens, swales, etc.	Varies - staff assessment needed		

Office Use Only, Do Not Write Below This Line

APPROVAL

Yes	No	Comments

Yes	No	Comments

Mike Britt, P.E., Division Director
Natural Resources Division

Date

Michael Stavres, Director
Community Services Department

Date