

## City of Hendersonville Stormwater Service Charge Credit Application Form GENERAL INFORMATION

**Instructions:** Applicants must provide adequate documentation to demonstrate to the City of Hendersonville Stormwater Division that all requirements for credit have been met in accordance with the Stormwater Service Charge Credit Policy in the time frame specified.

Submit application by mail to: City of Hendersonville

Stormwater Division

305 Williams St. Hendersonville,

NC 28792

Or by email to: <a href="mailto:mhuffman@hvlnc.gov">mhuffman@hvlnc.gov</a>

Owner or Owner's Representative (Site Contact):	Property Parcel Number(s):	
Property Address (include name of school if applying for Education Credit):		
Contact Phone Number:	Contact Email:	
Mailing Address (if different than property address):		
maning reduces (if different than property address).		
Annual Certification Credit for Stormwater Control Structures Application Form- Attached:		
Approved As-Built drawings and calculations with professional certification		
Executed Operation and Maintenance Agreeme		
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Executed Operation and Maintenance Agreemed Inspection and Maintenance Reports Maintenance Plan  This application is to request credit or adjustment to for the property at the above location.	the assigned stormwater Service Charge	

## Stormwater Service Charge Credit – Application Form ANNUAL CERTIFICATION CREDIT FOR STORMWATER CONTROL STRUCTURES

**Instructions:** Applicant must provide adequate documentation to demonstrate to City of Hendersonville Stormwater Division that the requirements of the Operation and Maintenance Agreement on file with the City of Hendersonville Stormwater Division have been satisfied for the facility and/or SCM for which credit is requested.

Owner or Owner's Representative (Site Contact):	Property Parcel Number(s):	
Property Name and Stormwater Facility Description:		
Property Address:		
☐ Check here if this certification is for RENEWAL of previously approved credit.  Documentation Checklist:		
Certification by qualified professional that:		
Operation of facility meets or exceeds original performance criteria,		
Facility, if providing detention, maintains its original volume as originally accepted,		
Facility is stabilized,		
The facility's outlet structure is well-maintained, and		
The facility or SCM has been inspected and maintained in accordance with best		
practices and written documentation on file with the City.		
I hereby certify that I have inspected the facility specified and found the above to be true and		
accurate.	I Tom /Nimilar	
Professional:	License Type/Number:	
Professional's firm:		
- 101 <b>0</b> 001011111 0 1111111		
Address:		
	(Seal and signature) if applicable	
Recently dated photographs showing condition (including any known damage or disrepair) of		
the facility or SCM. Photos should include:		
Views of outlet structure (s) and orifice		
For proprietary devices - views inside chambers, filters, screens etc.		
Vegetation		
View of outfall, downstream channel, and emergency spillway		
View of the dam showing condition of the downstream channel, and		
View of areas designed to catch sediment (if possible).		
Inspection Report(s) if conducted separate from routine City inpsection		
Maintenance Records for each facility or SCM for which credit is being requested		