

# Application for Stormwater Treatment Practice (STP) Credit



## 1. Instructions

Additional information on the Stormwater Treatment Practice (STP) credit can be found in the Shelburne Credit Manual For Stormwater Fees which is available online at the Shelburne web site ([www.shelburnevt.org](http://www.shelburnevt.org)). A separate application form must be submitted for each property on which stormwater fee credit is being requested. Completed forms can be emailed to: [crobinson@shelburnevt.org](mailto:crobinson@shelburnevt.org)

## 2. Certifications and Signatures

I hereby request that the Shelburne Stormwater Utility (SSU) review this application for stormwater user fee credit. I certify that I have the authority to make such a request and grant such authority for this property. I certify that the attached information is true and correct to the best of my knowledge and belief. I agree to provide corrected information to the Town should there be any change in the information provided herein. I understand that once credit is awarded it is my responsibility to inform the SSU of any changes to the STP, drainage area, or property that might impact the credit awarded under this application.

By my signature below, I hereby grant SSU staff the right to access the property for the purpose of monitoring and inspecting the stormwater treatment system. I understand that maintenance of the stormwater system is my responsibility and that if the stormwater system is not properly maintained that the SSU can eliminate any credit awarded as part of this application.

I understand that once credit is awarded as part of this application that I am responsible for sending annual reports and copies of new or re-issued permits to the SSU. Failure to provide this information could result in loss of the credit awarded as part of this application.

### Authorized Representative

Signature:  Date:   
Name:  Title:   
Phone:  Email:

### Witness

Signature:  Date:   
Name:  Title:

## 3. Property Information

Property Owner Name:  Phone Number:   
Email Address:   
Mailing Address:   
Property Physical Address:   
Parcel Identification Number:   
Existing Stormwater Billing Account Number:   
Property Manager (PM) Name:   
PM Phone Number:  PM Email Address:

#### 4. Existing Stormwater System Information

State of Vermont Stormwater Permit Number (Most Recent):

Other State of Vermont Stormwater Permits Issued to the Property (list all):

Date of Most Recent Stormwater System Inspection:

Name of Person Performing the Most Recent Stormwater System Inspection:

#### 5. Stormwater Treatment Practice Information

If applying for credit for multiple Stormwater Treatment Practices (STPs) the applicant must provide separate information for each STP. Complete and submit a separate section 5 worksheet for each STP.

This Worksheet is for STP Number  of  (total).

STP Drainage Area (Acres):

Impervious Area Draining to STP (Acres):

Is this Application Requesting Credit for Treating Impervious Area on Another Property?  Yes  No

This STP is Applying for Credit in the Following Categories:

- Water Quality Volume (WQ<sub>v</sub>)
- Groundwater Recharge (Re<sub>v</sub>)
- Channel Protection (CP<sub>v</sub>)
- Overbank Flood (Q<sub>p10</sub>) or Extreme Storm (Q<sub>p100</sub>)

#### Provide the Following Information for the STP

- A written narrative describing the STP and its location.
- A map delineating the drainage area and impervious area flowing to the STP.
- A site plan and construction details for the STP.
- Calculations to support the STP design.
- Hydrologic model results that show existing and post improvement hydrographs for the WQ<sub>v</sub> storm event, the CP<sub>v</sub> storm event, and the 25-year storm event.
- Written Description of the Ongoing Maintenance Needs for the STP

#### Engineers Certification

I certify that the Stormwater Treatment Practice (STP) described above has been constructed in conformance with the information provided. The calculations, technical details, and information provided accurately reflect the condition of the STP. I further certify that I have conducted appropriate site visits and due diligence to ensure the accuracy of the information provided, that the STP is in an acceptable state of maintenance and repair, and that it is operating as designed.

Signature:

Name:

Date:

Title: