

# City of Essex Junction Stormwater Utility Combined Sewer Credit Application



## 1. Instructions

Parcels that are interested in obtaining the Combined Sewer Credit must submit a completed application form to the Water Quality Superintendent. A separate application form must be submitted for each parcel for which Combined Sewer Credit is being requested. Forms must be signed by the authorized representative, such as an officer, director, partner, or registered agent with authority to execute instruments for the institution located on the parcel. Completed forms can be emailed to:

[cmandigo@essexjunction.org](mailto:cmandigo@essexjunction.org) or mailed to: City of Essex Junction Attn: Stormwater Department, 2 Lincoln St, Essex Junction, VT 05452. Forms are **due January 1<sup>st</sup> of a calendar year** and will be applied on the first utility bill of the next Fiscal Year, normally mailed in October.

Credit will only be applied to the portion of the parcel(s) served by the combined sewer system.

## 2. Certifications and Signatures

I hereby request that the Water Quality Superintendent review this application for Combined Sewer Credit. I certify that I have the authority to make such a request and grant such authority for this parcel. 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 City of Essex Junction should there be any change in the information provided herein. I understand that once the credit is awarded, it is my responsibility to inform the Water Quality Superintendent of any changes that might impact the credit awarded under this application.

### Authorized Representative

Signature:	<input type="text"/>	Date:	<input type="text"/>
Name:	<input type="text"/>	Title:	<input type="text"/>
Phone:	<input type="text"/>	Email:	<input type="text"/>

## 3. Parcel Information

Parcel Owner Name:	<input type="text"/>	Phone Number:	<input type="text"/>
Email Address:	<input type="text"/>		
Mailing Address:	<input type="text"/>		
Parcel Physical Address:	<input type="text"/>		
Parcel Identification Number:	<input type="text"/>		
Existing Essex Junction Utility Billing Account Number:	<input type="text"/>		

#### 4. Combined Sewer Credit Information and Calculations

1. Square ft of impervious area treated by combined sewer system / total impervious area of parcel (square feet) X 100= % of credit received, (rounded up to nearest whole #).

Impervious area treated by the combined sewer system,  square feet

☐ Attach a map that shows the catchment area of the combined sewer system for a parcel

#### Do not write below this line (Utility Use Only)

Credit Approved (check one): ☐ Yes ☐ No

Applicant provided the impervious area of the combined sewer system=

Assigned the impervious area of the parcel in utility=

% Credit calculated=

If No, provide a brief explanation for denial and what information is missing:

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Date approved or denied: \_\_\_\_\_ Date credit will be applied to utility bill: \_\_\_\_\_

Signature:

Date:

Name:

Title:

Phone:

Email: