

Permit # ______

STORM WATER MANAGEMENT AREA/CAPITAL CHARGE

Subdivision Name:		
LotBlock Address:		
Name of Applicant	Phone	
Applicant Email Address		
Street Address City	State	Zip
I hereby agree to all of the conditions contained in Ordinance as from time to time modified.	the Storm Water Managemen	nt
Signature of Applicant	Date	·
Storm Water Management Area/Capital Charg	ges	
SWMACC – Single Family Residential SWMACC – Med./High Density Residential SWMACC – Commercial & Industrial	\$6,859.72 per acre \$11,319.45 per acre \$13,309.46 per acre	
Total Fee:	\$	