

APPLICATION FOR STORMWATER ASSESSMENT MITIGATION CREDITS

Property Owner(s): _____
 Last Name _____ First Name _____

Mailing Address: _____
 Street Number and Name _____

City _____ State _____ ZIP Code _____

Tax Map Parcel No.: _____

Phone: _____

Certifying Registered Engineer or Land Surveyor: _____

Professional Registration No.: _____

Company: _____

Company Phone: _____

Check if attached	Required for Submission by Owner
<input type="checkbox"/>	Location Map
<input type="checkbox"/>	Stormwater Facility Information a. Date constructed or anticipated construction date. b. Was design approved by City Staff? c. Certified stormwater report using City mitigation credit methodology. d. Best Management Practice (BMP) inspection certification. e. Receipts, photos, dates of last system maintenance. f. Basin outlet information, including size and type. g. Property area (acres) h. Area of parcel treated by BMP (acres) i. Impervious Area (acres) j. Condition rating facility by owner (e.g., good, fair, or poor).
<input type="checkbox"/>	Type of BMP
<input type="checkbox"/>	Maintenance Plan and Schedule
<input type="checkbox"/>	Right of Entry Agreement for Department Staff
<input type="checkbox"/>	Application Fee (\$25.00 or \$100.00)

Owner Certification

I certify that the information contained in the application is, to the best of my knowledge, correct and represents a complete and accurate statement. I further understand that the credit determination will be based on the information provided and a later determination that the information provided was inaccurate may result in loss of the credit.

 Signature of Owner _____ Date _____

 Signature of PE or PLS, License Number, Seal _____ Date _____

Mail form and any applicable information to:
 City of St. Pete Beach, Stormwater Management
 155 Corey Avenue, St. Pete Beach, FL 33706
 (727) 363-9243
 Attn.: Mitigation Credit Review