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**CITY OF CHAMPAIGN, ILLINOIS
 PUBLIC WORKS DEPARTMENT
 STORMWATER UTILITY FEE INCENTIVE PROGRAM
 INCENTIVE APPLICATION FORM**

City Reference No. _____
 Date Received _____
 / /

<p>Incentive Application Types (Please check all that apply)</p> <p><input type="checkbox"/> Rain Garden <input type="checkbox"/> Rain Barrel Reimbursement <input type="checkbox"/> Rate Reduction <input type="checkbox"/> Volume Reduction <input type="checkbox"/> Water Quality</p>	<p>Applicant / Owner Information (Please print or type)</p> <p>Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: (____) _____ Email: _____ Reimbursement check to this address <input type="checkbox"/> or to address below <input type="checkbox"/> ?</p>
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Property Owner Information
 (If different from above)

Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

Property Information

Property Location: _____
 Parcel Identification Number (PIN): _____ Watershed: _____
 Property Size (acres): _____ Impervious Area (acres): _____

Rain Garden Incentive Information

Impervious area contributing runoff to rain garden (square feet, 500 minimum): **CA =** _____
 Depth of ponding in rain garden, average (inches, 6 recommended): **D =** _____
 Surface area required to capture runoff from 1 inch of rainfall (square feet): **SA = CA / D =** _____
 Surface area of rain garden as proposed to be constructed (square feet): _____
 Site plan attached showing impervious areas and proposed rain garden location? Yes No
 Soil amendments required in order to insure infiltration? Yes No
 Planting plan using predominately native plants attached? Yes No
 Permission for City to inspect site? Yes No _____ Signature ___ / ___ / ___ Date

Rain Barrel Reimbursement Requirement

Please submit your receipts for purchases of rain barrels (must be from a local supplier)

Other Incentive Information

Describe the practice(s) being proposed and the incentives that you believe apply on a separate page and attach the description(s) to this form.

Impervious area contributing runoff to stormwater control (square feet, 500 minimum): **CA =** _____
 Compute design storage volume for incentive (cubic feet): **Volume = CA / 12 =** _____
 Enter proposed volume if different than required volume (cubic feet); _____
 Provide design information from contractor for permeable pavement or green roof design or bioswale
 Provide manufacturer specifications for cisterns
 Provide construction cost quote: **CC = \$** _____

Type of practice Cistern Permeable Pavement Green Roof Rain Garden
 (check all that apply) Bioswale Manufactured BMP Vegetated Swale Detention Basin
 Permission for City to inspect site? Yes No _____ Signature ___ / ___ / ___ Date

