



# Stormwater Utility Charge Rate Reduction Application (Non-Residential Account Holders Only)

\*Application fee of \$300 is due at time of submittal.

### Applicant Information

Applicant Name:	Phone #:
Applicants Mailing Address:	Email:

### Owners Information (if different than above)

Owner Name:	Phone #:
Owners Mailing Address:	Email:

### Service Location

Murphy Account Number:    ___ - _____ - ___	Property Address:
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### Appeal based on Runoff Rate Reduction System

*Account holders of non-residential properties in the City of Murphy may appeal the stormwater utility charge rate, levied to the property, only if a functioning stormwater retention or detention system, designed by a licensed engineer in the State of Texas, is actively and appropriately utilized to reduce the peak stormwater runoff rates from the property. An engineer's sealed design calculations for the detention or retention system must be attached and submitted with this application for review. The designed peak runoff rate from the property will be used to determine the magnitude of the rate reduction, if any. Rate reductions are provided at the discretion of the City of Murphy Public Works Department, which reserves the right to deny the application for any reason.*

\_\_\_\_\_ Initial that Design Calculations for Detention or Retention System have been provided.

### Required Specifications

Total Property Size (acre):	Total 100-year Storm Event Peak Runoff Rate originating from Property (cfs):
Detention/Retention System Drainage Area (acre):	Effective/Overall C-Value (Rational Equation, 0.5 is maximum reduction offered):

### Appeal based on Other Evidence of Reduced Runoff Rate

\_\_\_\_\_ Initial if seeking rate reduction or review based on other evidence

\_\_\_\_\_ Initial if other evidence is attached

Describe other evidence for rate reduction:

### 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. By signing below, I agree to allow City staff or inspector on site to review and verify the above information (if needed).*

Signature: \_\_\_\_\_

Print Name:	Date:
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METHOD OF PAYMENT:	RECEIVED BY:	DATE:
REVIEWED BY:	DATE:	NOTES:
_____ DENIED                      _____ APPROVED                      _____ ADJUSTED		