



Department of Public Works  
**City of Takoma Park**

## **STORMWATER UTILITY FEE REQUEST FOR CORRECTION**

Application must be completed in full in order to be considered

This application must be used by a property owner requesting a correction to the stormwater utility fee assessment. The request must be received within 30 days after the date of the assessment notice or receipt of the bill. The City will respond to the written request within 60 days. The decision of the City will be final.

Property Owner Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

TAX ID # (if known): \_\_\_\_\_

Authorized contact (if different from owner): \_\_\_\_\_

Please indicate the reasons for the request for correction:

- Incorrect classification of property for purposes of determining the fee
- Error in the square footage total of the impervious surface of the property
- Mathematical errors in the calculation of the fee
- Error in the identification of the property-owner

Please provide an explanation of the specific details to support your request for correction:

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The burden of proof is on the applicant to demonstrate, by clear and convincing evidence, that there is an error. The request must include certification by a registered engineer or professional land surveyor if alleging an error in the total square footage of the impervious surface area for multi-family, commercial, or institutional property. If for a single-family property, the documentation must be developed through a reasonably reliable method. Please provide any documentation that will be helpful to review the request, including photographs, easement documents, property survey, etc.

**List of documents attached:**

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**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Name (Print): \_\_\_\_\_

**For Official Use Only:**

**Request for Correction:** \_\_\_\_\_ Granted \_\_\_\_\_ Not Granted

**Property Address:** \_\_\_\_\_

**Correction:** \_\_\_\_\_

**If denied, reason for denial:** \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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