

Stormwater Utility Credit Application Forms
Structural Practices
Effective July 1, 2022

City of Fairfax, Virginia
Department of Public Works
Stormwater Utility
10455 Armstrong Street
Fairfax, VA 22030
(703) 385-2578
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www.fairfaxva.gov/stormwaterutility

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City of Fairfax, Virginia
Department of Public Works

Application Form for Stormwater Utility Credits—<u>Structural Practices</u>

Applicant Inf	Dilicant Information Lookup Lot Size Information at http://realestate.fairfaxva.gov				
Lookup SWU Fee at www.fairfaxva.gov/swulookup					
Property Add	lress / SWU Fee:			/\$	
Total Lot Size (Acres):					
Owner / App	licant Name:				
Phone Numb	er:	/ E-Mail Address:			
Facility #1: Documentation Required:					
	le as much of the following	-	<u>D</u>	ocumentation Required:	
Please provide as much of the following information as possible: 1) When was the SWM facility constructed?			•	 Photo of the SWM facility showing current condition and a sketch/ 	
2) Was the SWM Facility constructed as a:					
☐ Condition of Development or ☐ Voluntarily (Check one)				drawing showing its location on the	
	es the SWM Facility treat any area beyond the			property.	
•	ere it is located?	,			
☐ Yes /	☐ No / ☐ Don't Know	(Check one)			
Facility #2:			<u>D</u>	ocumentation Required:	
Please provide as much of the following information as possible: 1) When was the SWM facility constructed? 2) Was the SWM Facility constructed as a:			•	 Photo of the SWM facility showing 	
				current condition and a sketch/ drawing showing its location on the property.	
☐ Condition of Development or ☐ Voluntarily (Check one) 3) Does the SWM Facility treat any area beyond the					
=	ere it is located?	a beyond the			
•	☐ No / ☐ Don't Know	(Check one)			
Facility #3:			<u>D</u>	ocumentation Required:	
Please provid	le as much of the following	information as possible:	•	Photo of the SWM facility showing	
1) When was the SWM facility constructed?				current condition and a sketch/	
2) Was the SWM Facility constructed as a:				drawing showing its location on the	
☐ Condition of Development or ☐ Voluntarily (Check one)				property.	
3) Does the SWM Facility treat any area beyond the					
•	ere it is located?	(6)			
☐ Yes /	■ No / ■ Don't Know	(Cneck one)			
Documentation & Certifications (please check each box and sign; digital signatures are acceptable)					
	I certify that the information provided in this application is true and accurate to the best of my knowledge, and that the facility(ies) are functioning as designed as of the date of this application.				
The owner/applicant has or will execute and record a Stormwater Facility Maintenance Agreemen				Facility Maintenance Agreement with	
tn	e City.		1		
	Applica	nt Signature	/	Date	