



# Stormwater Utility Fee Credit Application Form

Stormwater Management Program

## Instructions

Fill out this form completely. One application must be submitted for each separate property location. Multiple Stormwater Control Measure (SCMs) may be included in the application for a single property location. Please insure all SCMs are in a proper state of repair and maintained. Attach all appropriate documentation to support this request. Documentation shall include the following:

- Site plan with SCMs and contributing drainage area.
- Description of SCMs.
- Documentation that SCMs meet one or more criteria for the fee credit (technical report).
- Seal by professional engineer licensed in South Carolina (only apply to Peak Discharge Rate Reduction, Runoff Volume Reduction and Quality Treatment Credit).
- Fill out and attach a Right-of-Entry Form.

Mail the completed application package to:

Stormwater Management Program  
P.O. Box 6122  
Moncks Corner, SC 29461

Questions and comments can be directed to the Stormwater Program Coordinator, at (843) 719-4195 or by [webswmp@berkeleycountysc.gov](mailto:webswmp@berkeleycountysc.gov).

## Property Owner Information

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: (\_\_\_\_) \_\_\_\_\_

## Owner's Representative

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: (\_\_\_\_) \_\_\_\_\_

### Property Information

Business Name (if applicable): \_\_\_\_\_

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

Parcel Number: \_\_\_\_\_

Property Size (ac): \_\_\_\_\_

Utility Account Number: \_\_\_\_\_

### Credit Applied

Place a check next to SCM credit being applied for and specify the percent of fee reduction applied for with this application:

	Type of Credit	% Reduction Applied to Property
<input type="checkbox"/>	Cistern	
<input type="checkbox"/>	Rain Garden	
<input type="checkbox"/>	Pervious Pavement	
<input type="checkbox"/>	Vegetated Filter Strip	
<input type="checkbox"/>	Peak Discharge Rate Reduction	
<input type="checkbox"/>	Runoff Volume Reduction	
<input type="checkbox"/>	Quality Treatment	
<input type="checkbox"/>	Low Impact Parcel	
<input type="checkbox"/>	Education	
<input type="checkbox"/>	Industrial NPDES Permit	
<input type="checkbox"/>	Watershed Stewardship	

### Narrative

Please provide a narrative describing your proposed and/or existing measures for which the credit is being applied for in as much detail as possible. Berkeley County reserves the right to require additional information as it decides will be necessary to support your proposed fee credit:

### Supporting Calculations

Attach all your supporting calculations and any other information required by the Credit Manual. Berkeley County reserves the right to require additional information concerning necessary calculations for determination of appropriate proposed fee credit.

**Operation & Maintenance Requirements**

( ) A Maintenance Covenant has been previously recorded for this property, has been sufficient for continued maintenance, and is up to date as of the time of this application.

O&M Agreement is recorded as follows

Book: \_\_\_\_\_ Pages: \_\_\_\_\_ - \_\_\_\_\_ County: Berkeley

( ) A Maintenance Covenant has not been recorded for this property. Attach a completed and signed Maintenance Covenant for review and execution by Berkeley County. This application will be held until these items are approved and recorded.

Book: \_\_\_\_\_ Pages: \_\_\_\_\_ - \_\_\_\_\_ County: Berkeley

**To be signed by Financially Responsible Party**

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

Mailing Address: \_\_\_\_\_

By signing below, I understand that receipt of a stormwater utility fee credit is contingent upon my actions as follows:

- 1. I (or my representative) must operate and maintain the SCM as described in the recorded Operation & Maintenance Covenant.
- 2. I must submit an annual SCM inspection report to the Berkeley County Stormwater Department by August 30th of each year.
- 3. I (or my representative) must correct any deficiencies identified in the annual SCM inspection report.
- 4. I must submit an annual credit renewal application along with the SCM inspection report.
- 5. I have read the "Stormwater Utility Fee Credit & Appeals Manual". I understand that I must abide by all terms and conditions described in the manual to maintain credit eligibility.

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

STATE OF SOUTH CAROLINA  
COUNTY OF BERKELEY

*I \_\_\_\_\_, a notary public in and for said county and state, certify that personally appeared before me this day, stated that he/she is \_\_\_\_\_ of \_\_\_\_\_, and acknowledged the execution of the foregoing instrument on behalf of said authority.*

*Witness my hand and official seal, this is the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_*

My Commission Expires \_\_\_\_\_

(Seal)

\_\_\_\_\_  
Notary Public (Signature)

\_\_\_\_\_  
Notary Public (Printed Name)

**For Berkeley County Use, Only: (Structural SCM)**

Design approval granted on \_\_\_\_\_

Stormwater Coordinator \_\_\_\_\_

**Post Construction**

As-Built Drawings:

( ) Provide as-built drawings of structural SCMs per Berkeley County Stormwater Management Program specifications

Post-Construction Certification:

For newly constructed structural SCMs, historical SCMs without recordation or retrofits for which credit is sought, a competent registered professional engineer or landscape architect must sign and seal the following statement after construction or installation of retrofits:

*I hereby certify that the stormwater management system of \_\_\_\_\_ has been constructed substantially per the design described in the Stormwater Utility Credit Application approved by Berkeley County on \_\_\_\_\_. I further certify that any discrepancies between the as-built condition and the approved design are incidental and have no effect on the system meeting the approved design intent.*

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

Signed: \_\_\_\_\_

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

(Seal)

**For Berkeley County Use, Only:**

Final approval granted on \_\_\_\_\_

Credit Term (Expires): \_\_\_\_\_  
(Industrial Permit Owners)

Stormwater Coordinator \_\_\_\_\_