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

City Reference No. _____

Date Received _____

/ /

Incentive Application Types

(Please check all that apply)

- Rain Garden
 Rain Barrel Reimbursement
 Rate Reduction
 Volume Reduction
 Water Quality

Applicant / Owner Information

(Please print or type)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: (____) _____
Email: _____
Reimbursement check to this address or to address below ?

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. Number of Rain Barrels: _____
Location of Rain Barrels: _____

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

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Rain Garden Incentive Determination

Has this Applicant received a rain garden incentive for this property in the past? **Yes** No
 Has the Applicant provided all required documentation? Yes **No**
 Has the rain garden plan been approved by the City to receive an incentive? Yes **No**

If any of the checked boxes above is adjacent to the red bold-faced answer a letter of determination that identifies the deficiencies is to be sent to the Applicant, otherwise the Rain Garden Incentive is computed as below:

Proration Factor (PR) is 1.0 if rain garden area is 100 square feet or greater, 0.0 if less than 50 square feet, or computed by dividing the actual rain garden surface area by 100 if at least 50 square feet but less than 100.

Incentive Amount = C1 = \$265 x PR = _____.

Rain Barrel Reimbursement

How many rain barrels were purchased? **N = _____**
 Has this Applicant provided a receipt for purchase of a rain barrel? Yes **No**
 If the "Yes" checkbox was selected the Rain Barrel Reimbursement is computed as:

Reimbursement Amount = \$27 X N = _____.

Other Incentive Determination

Has this Applicant received pay-outs for all of the requested incentive types in the past? **Yes** No
 Has the Applicant provided all required documentation? Yes **No**
 Has the incentive plan been approved by the City? Yes **No**

If any of the checked boxes above is adjacent to the red bold-faced answer, the application is denied and a letter of determination that identifies the deficiencies is to be sent to the Applicant.

For each type of incentive please check to see if the same has been awarded at this address in the past. If so this property is no longer eligible to receive the specific type of incentive and the value below is \$0, otherwise enter \$265 for the incentive type

The Other Incentive is computed as follows:

If qualified for Rate Reduction Incentive,	C2 =	\$	_____
If qualified for Volume Reduction Incentive,	C3 =	\$	_____
If qualified for Water Quality Incentive,	C4 =	\$	_____
Maximum "other" incentive earned.	CX = Sum =	\$	_____
Other incentive = MIN (CX, CC / 4)	CO =	\$	_____

Total of Incentives

Rain Garden	= C1 = \$	_____
Other Incentives	= CO = \$	_____
Total Incentive	=	\$ _____

Incentive Application Form Submittal Address

Submit Incentive Application Forms and supporting documentation to:

*Public Works Department
City of Champaign
702 Edgebrook Drive
Champaign, IL 61820
ATTN: Stormwater Coordinator*