Storm Water Utility Fee Credit Application
Non-Residential Properties

City of Lino Lakes
600 Town Center Parkway
Lino Lakes, Minnesota 55014
Engineering Department:
651-982-2428
Fax: 651-982-2499
building@linolakes.us

Property Address: _____ **Suite #:** _____

City: _____ **State:** _____ **Zip:** _____

Property ID Number (PIN)*: _____

*Property Identification Number (PIN) can be found on Anoka County's website.
Go to: www.anokacounty.us and click on "Find my property info". The PID is the same as the PIN.

PROPERTY OWNER	**Name:** _____ **Phone Number:** _____ **Address:** _____ **City:** _____ **State:** _____ **Zip:** _____ **E-mail Address:** _____

Required submittals to complete application:

1. For impervious surface adjustment:
   a. Certificate of Survey or Site Plan, drawn to scale, identifying pervious and impervious areas
   b. Total site area in acres and total impervious surface area in acres

2. For retention or water quality credit:
   a. Certificate of Survey or Site Plan, drawn to scale, identifying pervious and impervious areas
   b. Total site area in acres and total impervious surface area in acres
   c. Surface water management plan and or modeling, if available
   d. Maintenance Agreement, if available

Ratepayer Certification

"By signing this application, I certify that I am the owner or authorized representative of the owner and have read this application and understand the terms and conditions of the credit program. I certify that this application and additional materials accurately describe storm water management and disposal on the property identified on this application. I grant the City permission to enter this property for the sole purpose of conducting a site inspection of the storm water management and disposal facilities on this property."

Name: _____

Signature: _____ **Date:** _____

Submit applications to:

This application must be completed and signed before it will be processed. When completed, send this application and all necessary attachments to building@linolakes.us.

OFFICE USE ONLY

Impervious Adjustment (if applicable): Original: _____ Acres Adjusted: _____ Acres

Water Retention/Water Quality Credit

Total Impervious: _____ Acres Approved Credit: _____ % Adjusted: _____ Acres

Does the property have a Storm Water Facilities Maintenance Agreement?: Yes ☐ No ☐
If no, owner must execute a Storm Water Facilities Maintenance Agreement.

Notes: _____

_____

_____

APPROVED FOR ADJUSTMENT

CITY ENGINEER: _____ DATE: _____

FINANCE DIRECTOR: _____ DATE: _____