



# TROTWOOD

“Together, We Are Creating a Bright Future”

## STORM DRAINAGE SERVICE CHARGE REQUEST FOR BACK CREDITS

**Instructions:** Non-residential property owners who have completed a Storm Drainage Service Charge Credit Application Form and have been approved by the City of Trotwood for a credit may apply for back credits that will be applied retroactively for up to four (4) billing periods (12 months) preceding the initial approval of credits. However, back credits will not be applied retroactively prior to January 1, 2007. Back credits will be applied retroactively provided that the conditions that gave rise to the approval of credits have been in place and functioning for the period of back credits requested. In no event shall the total number of back credits exceed the total of the credits previously approved by the City. This form must be completed and delivered to **City of Trotwood, Public Works Operations Manager, 2400 Olive Road, Trotwood, OH 45426** to receive the back credits.

| SECTION 1. PROPERTY OWNER INFORMATION  |   |  |
|--|---|--|
| Name   |   |  |
| Customer Billing Account # (refer to City utility bill)                                  |   |  |
| Approved Credit Application #  |   | Date Credit Application Approved                                 |
| Mailing Address (Street)   |   |  |
| City   | State                                   | Zip Code   |
| Telephone #  | Fax #                                   | Email Address  |
| Address/Location of Property Requesting Credit (if different than above mailing address) |   |  |
| Parcel ID # of Property Requesting Credit  |   | Date Submitted   |
| SECTION 2. CREDITS REQUESTED   |   |  |
| APPLICABLE CREDIT(S)   | CURRENT CITY APPROVED CREDIT PERCENTAGE | # OF MONTHS REQUESTED FOR BACK CREDITS (CANNOT EXCEED 12 MONTHS) |
| Credit for Existing or New Detention/Retention Facility                                  |   |  |
| Credit for Over Detention  |   |  |
| Credit for Regional Detention/Retention Facility   |   |  |
| <b>Total Credit(s) Available</b>   |   | <b>N/A</b>   |

...Form continued on back...

**SECTION 3. CERTIFICATION OF THE REQUEST**

The information contained in this request is, to the best of my knowledge and belief, a complete and accurate statement. I hereby certify that the conditions that gave rise to the approval of a storm drainage service charge credit(s) have been in place and functioning for the period of back credits requested.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

*Information below this line is for City of Trotwood use only.*

| APPLICABLE BACK BILLING<br>QUARTERS |   |   |   | TYPE OF<br>CREDIT  | CURRENT APPROVED<br>CREDIT % |
|-------------------------------------|---|---|---|--|------------------------------|
| 4                                   | 3 | 2 | 1 |  |                              |
|                                     |   |   |   | Credit for Existing or New<br>Detention/Retention Facility |                              |
|                                     |   |   |   | Credit for Over Detention                                  |                              |
|                                     |   |   |   | Credit for Regional<br>Detention/Retention Facility        |                              |
|                                     |   |   |   | <b>TOTAL CREDIT %</b>                                      |                              |

|                                      |  |
|--------------------------------------|--|
| Back Credit Request Form Number      |  |
| Approved Credit Application Number   |  |
| Public Works Review Staff (Initials) |  |
| Public Works Director Approval       |  |
| Date Approved                        |  |