

FORM 2

Non-Residential Stormwater Management Credits: New Development/Re-Development (Site Plan Review Required)



Project Site Information

Address: _____
Street Address Zip Code

Parcel ID (Chart, Block, Lot # + 3-digit ID): _____

Project ID (if assigned): _____

Contact Information

Applicant (must be owner, lessee or buyer)

Name: _____
Last First M.I.

Business Name (if Applicable): _____

Relation to Owner (lessee, buyer, etc, if Applicable): _____

Mailing Address: _____
Street Address Apartment/Unit #

City State Zip Code

Phone #: (____)____ - _____ E-mail Address: _____

Owner (if different from Applicant)

Name: _____
Last First M.I.

Mailing Address: _____
Street Address Apartment/Unit #

City State Zip Code

Phone #: (____)____ - _____ E-mail Address: _____

Agent/Representative

Name: _____
Last First M.I.

Mailing Address: _____
Street Address Apartment/Unit #

City State Zip Code

Phone #: (____)____ - _____ E-mail Address: _____

Credit Information

Final Total Impervious Area: _____ square feet

The credit options and their corresponding credit values are listed in columns A and B, respectively. Indicate in column C the amount of impervious area that is eligible for each credit option, and note the product of columns B and C in column D. *The billable impervious area equal to the Total Impervious Area minus the sum of column D.*

| A | B | C | D |
|--------------------------------|------|-----------------------|---------------------------|
| Minimum Water Quality Credit: | 0.25 | x _____ square feet | = _____ square feet |
| Minimum Water Quantity Credit: | 0.05 | x _____ square feet | = _____ square feet |
| Basic Water Quality Credit: | 0.50 | x _____ square feet | = _____ square feet |
| Basic Water Quantity Credit: | 0.10 | x _____ square feet | = _____ square feet |
| Extra Water Quality Credit: | 0.75 | x _____ square feet | = _____ square feet |
| Extra Water Quantity Credit: | 0.25 | x _____ square feet | = _____ square feet |
| | | | Total = _____ square feet |

Billable Impervious Area (Total IA minus Sum of Column D): _____ square feet

Applicant Signature

I hereby certify that I am the owner of record of the named property, or that the owner of record has authorized me to submit this application on his or her behalf. I agree to conform to all applicable laws of the City of Portland. In addition, I understand that the City of Portland Department of Public Works has the authority to enter and inspect all areas that pertain to this application at any reasonable hour to verify that the information contained in this form is accurate.

Signature: _____ Date: _____