



Lake County Stormwater Management Department

User Fee Adjustment Request

- Non-Residential or Residential Property Owners
- Mail completed application to:

LCSMD
 Attn: Request for Adjustment
 550 Blackbrook Road
 Painesville OH 44077

Property Owner Information	
Property Owner Name: _____	
Property Address: _____ Parcel ID # : _____	
Owner Mailing Address (if different from above): _____	
City _____	State: _____ Zip: _____
Type of Adjustment Requested:	
<input type="checkbox"/> Parcel Information <input type="checkbox"/> Impervious Area <input type="checkbox"/> Credit <input type="checkbox"/> Other	
Date of Request: _____	
Reason for Adjustment Request:	
<i>Property Owner Signature</i>	<i>Date</i>

Stormwater Department Approval	
<input type="checkbox"/>	Approved
<input type="checkbox"/>	Disapproved
Comments:	

Reviewer (Print Name): _____

Reviewer Signature *Date*

Director or Department Approval *Date*

For Finance Purpose Only:

Account: _____

Tax Year: _____ Amount of Total Adjustment : \$ _____