



City of Annapolis
Department of Planning and Zoning
160 Duke of Gloucester Street
Annapolis, MD 21401-2517

Permitting@annapolis.gov • 410-260-2200 • Fax 410-263-9158 • TDD use MD Relay or 711 • www.annapolis.gov

Stormwater Management Credit Application Residential

Please fill out this form and mail to address above. **Note:** Submitting this application gives permission for an inspector to visit your property for verification purposes.

Date _____

Name _____

Street address _____ Apt _____ Zip _____

Phone _____ Email _____

Property Tax ID # _____ Size of lot/property (ft²) _____

To determine the size of your property, please visit the Maryland Department of Assessments and Taxation website at http://sdatcert3.resiusa.org/rp_rewrite/index.aspx and search for your address.

Type of home (please check one):

Single Family Detached Home

Townhome/Rowhome

Semi-Detached Home (Duplex)

Other (specify) _____

Date of Installation of Stormwater Management Device _____

Type of Stormwater Management Facility (check all that apply):

Rain Barrels (hydrodynamic structures) # _____

Rain Gardens (bioretention)

Pervious Pavers

Green Roofs (bioretention)

Other (specify) _____

Describe maintenance performed on device:

FOR CITY USE ONLY

Approved

Not approved

MIT Approved Imp. Sfc. (ft²) _____

Date inspected _____ By _____

Stormwater Management Credit Application Submittal Requirements for Residential

1. Submit completed application form.
2. Site Plan showing property lines and location of stormwater management device.
3. For stormwater facilities installed through a grading permit with the City: A copy of the Stormwater Management Facility Maintenance Agreement and supporting documentation detailing the maintenance, repair, and improvement history. If you do not have a maintenance agreement or can not find one, contact Annapolis Department of Neighborhood and Environmental Programs at 410-263-7946.
4. Schedule a site visit which will be performed to verify your application. A City staff member will contact you when we are in receipt of your application.

Note: This credit expires after two years and can be renewed upon submission of updated documentation.

Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and attachment, and that based on my inquiry of those individuals immediately responsible for obtaining the information herein, I believe the submitted information is true, accurate, and complete.

Owner or Applicant (print) _____

Signature _____ Date _____