

**Madison Storm Water Utility Request  
For Rate Adjustment for Stormwater Treatment Via Rain Garden**

**Please fill out this form:**

I, \_\_\_\_\_, hereby request a rate adjustment for stormwater utility billing for impervious areas treated with a rain garden as provided for in the Madison General Ordinances Section 37.05(4)(d) and detailed in Section 3.5 of the Rate Adjustment Policy approved by Common Council on March 15, 2011. I understand that this rate adjustment would expire on January 1, 2030.

I certify that the property located at \_\_\_\_\_, parcel number \_\_\_\_\_ and owned by \_\_\_\_\_ meets the following criteria:

1. Has a rain garden installed and has an adequate drainage area to fill the rain garden.
2. The impervious area draining to the garden: \_\_\_\_\_ square feet
3. The rain garden dimensions are Width \_\_\_\_\_ x Length \_\_\_\_\_ x Depth \_\_\_\_\_.
4. I understand that the City Engineer shall verify the above information and may request photo documentation of the rain garden.

I will advise the City Engineer when either of #1 or #2 above is no longer true. I understand the City may bill to recover credits that were improperly applied or received by the owner.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Contact information:

Email : \_\_\_\_\_

Phone: \_\_\_\_\_

**Return this form to:**

City of Madison Storm Water Utility  
City Engineering Division  
210 Martin Luther King Jr., Blvd  
City-County Building, Room 115  
Madison, WI 53703

For Internal Use		
	Date	Initials
Received	_____	_____
Dane Co. Approval	_____	_____
Billing	_____	_____
Filed	_____	_____