



WEST MIFFLIN SANITARY SEWER & STORMWATER AUTHORITY

www.wmsssa.org

1302 LOWER BULL RUN ROAD
WEST MIFFLIN PA, 15122

PHONE: (412)-466-6070 FAX: (412)-466-8108

Stormwater Adjustment Appeal Application

Customers should use this form if it is believed that they are being charged incorrectly for their stormwater fee.

This includes:

- Customers who believe the Impervious Area (any surface areas designed to be gravel, crushed stone, aggregate, or ballast, unless designed as an infiltration BMP) or the Equivalent Residential Unit (ERU) calculation for the property is incorrect.
- Customers who believe the stormwater fee has been assigned to the incorrect property/parcel.

Applications will be available for submission between January 1st & March 31st every year. All applications submitted after this date will automatically be denied.

All appeal forms shall be submitted along with payment and proper documentation or shall be considered denied.

Non-Residential/Commercial:

When appealing, the company should provide a survey completed by a professional licensed surveyor (P.L.S) to measure the square footage of the impervious surfaces within property lines. The documentation provided should determine the extents of the impervious surface and pervious surface and shall be signed and sealed by the P.L.S. \$150 non-refundable fee is required & \$500 escrow will be held (if possible, please include 2 separate checks)

Please fill out and submit this form to West Mifflin Sanitary Sewer & Stormwater Authority office via:

- Mail: 1302 Lower Bull Run Road, West Mifflin Pa, 15122 – **Attention: Stormwater**
- Email: wmssma@wmssma.org – **Subject: Stormwater Adjustment Appeal Application**
- Fax: (412)-466-8108 - **Attention: Stormwater**

Name: _____ **Date:** _____

Email: _____ **Phone #:** _____

Property Type: Residential Commercial **Appeal Type:** IA/ERU Ownership

Property Address: _____

Parcel ID (if known): _____ **Current IA/ERU Estimate (if known):** _____

Please include all supporting documents & attachments with this application.

Include any other additional supporting information below:

Continue on back to complete application —>

Confirmation of Application Conditions & WMSSSA Access Rights

I, (print name) _____ agree to all conditions of the appeal application that I have applied for as outlined in the WMSSSA *Stormwater Appeal Resolution*. Additionally, I agree that WMSSSA may at a reasonable time, enter my property to inspect the property condition or operation of BMP's.

Property Owner Signature

Date

***** FOR WMSSSA USE ONLY *****

Date Received: _____ **Appeal Status:** Approved Denied

Date Reviewed: _____ **Reviewer Signature:** _____
