IMPERVIOUS AREA MODIFICATION REQUEST FORM

Instructions: Classification 2 (Developed Non-Residential parcels) property owners who believe that the total impervious area shown on their stormwater service fee bill is incorrect may request that the County re-evaluate the impervious area. This form will also be used for the appeal process. Any person aggrieved by the amount of the Stormwater Fee imposed with respect to property in which he has an interest may appeal the amount of the Stormwater Fee by completing this form and submitting it to the Assistant County Administrator for Public Works within thirty (30) days of mailing or delivery of the notification of the Stormwater fee. Requests must be supported with verification of the actual total impervious area for the property. Impervious surface shall mean those hard surfaces which either prevent or retard the entry of water into the soil and include such surfaces as roof tops, asphalt or concrete paving, driveways, parking lots, walkways, sidewalks, patio areas, storage areas, graveled areas, or other surfaces which affect the natural infiltration. A request to modify impervious area may only be used for properties classified as Classification 2 parcels (developed non-residential parcels) under the County's Stormwater Service Fee Program. Properties classified as Classification 1, 3 or 4 under the County's Stormwater Service Fee Program are not eligible for an impervious area modification since the fee that the property owner pays is based on the classification of the parcel and not on the amount of impervious area on the property.

The request form must be completed in its entirety and delivered to the Assistant County Administrator for Public Works to begin the review process. A **copy of the tax bill** for the parcel in question must accompany this request.

| PROPERTY OWNER INFORMATION | | | | | |
|---|--|--|------------|--|--|
| Name: | | | | | |
| Mailing Address: | | | | | |
| City: | | | State: | | |
| Zip: | | | Telephone: | | |
| Fax (if applicable): | | | E-mail: | | |
| Location/address of property requesting | | | | | |
| modification: | | | | | |
| (if different from mailing address above) | | | | | |
| Tax Map Number of property requesting | | | | | |
| modification: | | | | | |
| Date Submitted: | | | | | |

Supporting Impervious Area Documentation:

Total impervious area currently shown on bill: (square feet)

Total impervious area based on your determination: ______(square feet)

What method of verification did you use to determine the total impervious area:

- South Carolina Licensed Land Surveyor (supporting documentation, including a handwritten or computer drafted sketch of the impervious area with the Surveyor's State License number and seal, must be attached to the request form).
- Measured by Owner or Owner's Representative using tape measure or equivalent tool (a handwritten or computer drafted sketch of the impervious area must be attached to the request form).

_ Other method (please describe and provide supporting verification).

Property Owner Certification:

The following certification must be completed by the property owner:

| Property Owner Certification | | | | |
|--|------|--|--|--|
| I hereby certify that to the best of my knowledge and request form is accurate. I am also certifying that th impervious area on the property located at: | | | | |
| Signature | Date | | | |
| Printed Name: | | | | |
| Title (if applicable) | | | | |

Information below this line is for Greenville County's use only.

| Request Form Number: | |
|---|-----------|
| Date Received: | |
| LDD Staff: | Initials: |
| Assistant County Administrator for Public | |
| Works Approval: | |
| Approved Modified Impervious Area (sq. ft): | |
| Date Approved: | |

| Received: | Initials: |
|---|-----------|
| Appeals Hearing Officer: | |
| Denied Modified Impervious Area: | |
| New Fee: | |
| Credit Amount: | |
| Recorded Real Property Services/Tax Office: | Initials: |
| Date: | Initials: |