



Thurston County Resource Stewardship
 Storm and Surface Water Utility
 Stormwater Fee Credit Program
 Education Application

Instructions:

1. Fill out this form completely
2. A separate application must be made for each property for which a credit is being requested.
3. Forms must be signed by the financially responsible person if an individual, or if not an individual, by an officer, director, partner, or registered agent with authority to execute instruments for the financially responsible person.
4. Mail the completed form to:

Thurston County
 Department of Resource Stewardship
 Water Resources – Storm and Surface Water Utility
 Bldg 4, Room 100
 2000 Lakeridge Drive SW
 Olympia, WA 98502

School District: _____
 Address: _____
 Contact Numbers: _____ Day: _____ Fax: _____
 Authorized Contact Mailing Address: _____
 Property Tax Parcel Number: _____
 School Name and Street Address: _____

Does this site have an approved annual Agreement to Maintain Stormwater Facilities document filed with the Utility? Yes No

If seeking the Watershed Partners Credit, does this site have an approved form from their Watershed Education Partner? Yes No

Please fill out a supplemental form describing the water quality and watershed education curriculum being taught at this school. Include grade(s), teacher(s) and number of students taught. Also, include any expenditure for materials or activities associated with an approved Watershed Education Partners program (Nisqually River Education Project, Chehalis Basin Education Consortium, and South Sound GREEN).

I hereby request Thurston County Stormwater Utility review this application for a stormwater fee credit. I certify that I have authority to make such a request and grant such authority for this property. The attached information is true and correct to the best of my knowledge.

Signature: _____ Name: _____
 Title: _____ Date: _____

Do not write in the shaded area (County Use Only)

Credit Approved (check one): Yes No Credit Amount
 (attach backup calculations): _____

If No, provide a brief explanation for denial: _____

If No, provide information on follow-up with applicant: _____

Date approved or denied: _____

Signature: _____ Name: _____
 Title: _____ Date: _____