

Per Chad's instructions 2/1/07

CITY OF NAPOLEON, OHIO
STORM WATER ABATEMENT CHARGE CREDIT APPLICATION

SERVICE ADDRESS: <u>1140</u> <u>E. Riverview Ave., Apt. 1B</u>		ACCOUNT NUMBER: <u>45-13300-2</u>
STREET NUMBER	STREET NAME	

SERVICE CLASS: RESIDENTIAL COMMERCIAL INDUSTRIAL OTHER _____ START DATE 2, 1, 07

ARE YOU THE PROPERTY OWNER: YES NO IF NO, THEN COMPLETE PROPERTY OWNER INFORMATION
 RESIDENT TENANT

NAME: (LAST, FIRST, MIDDLE INITIAL)		PROPERTY OWNER NAME: (LAST, FIRST, MIDDLE INITIAL)	
ADDRESS: (IF DIFFERENT FROM SERVICE ADDRESS)		ADDRESS: <u>Aaron Rental Properties</u>	
CITY, STATE, ZIP:		CITY, STATE, ZIP: <u>Ashland, Ohio 44805</u>	
HOME PHONE:	DRIVER'S LICENSE #:	HOME PHONE: <u>419-281-3367</u>	WORK PHONE:
TID OR SOCIAL SECURITY NO. (OPTIONAL)	BIRTHDATE:	TID OR SOCIAL SECURITY NO. (OPTIONAL): <u>34-1762556</u>	BIRTHDATE:

Total Area Of Property/Lot: 288 s.f.
Impervious Area: _____ s.f.

Signature Kathleen Kruty
TENANT/AUTHORIZED AGENT OF OWNER OR TENANTS

Date 2, 2, 07

FOR CITY USE ONLY

E.R.U. Credit* _____ %

E.R.U. Credit: _____ (If zero, see explanation below.)

Net Billable E.R.U. _____

*Multi-level resident IAL units are eligible for up to a 50% credit.

APPROVED

EFFECTIVE DATE: 01, 01, 2007

DENIED
EXPLANATION, IF APPLICABLE:

SECONDARY ELECTRIC METER FOR OFFICE.

[Signature]
CITY ENGINEER

Date 02, 07, 07

RETURN COMPLETED APPLICATION TO ENGINEERING DEPARTMENT

02-06-07P01:24 RCVD