

**Green Infrastructure Credit Application**

*Note: For new construction, application review will not begin until the property owner has notified MSD's Storm Water Management Department that the construction has been completed.*

**Section 1: Applicant Information (Financially Responsible Person)**

Date Submitted: \_\_\_\_\_

Green Management Practice Location: \_\_\_\_\_

Property Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Current Annual Drainage Charge: \$ \_\_\_\_\_ ESU: \_\_\_\_\_

|                     |
|---------------------|
| MSD Reviewer: _____ |
| WM No. _____        |

**Section 2: To be completed by the Applicant's Engineer**

Name: \_\_\_\_\_ Kentucky P.E. No. \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Section 3: To be completed by MSD Revenue Administration**

MSD Revenue Representative: \_\_\_\_\_ Date Received: \_\_\_\_\_

Applicant Account Name: \_\_\_\_\_ Impervious Area (SQ. FT.): \_\_\_\_\_

Premise No: \_\_\_\_\_ Total ESU's: \_\_\_\_\_

Account No: \_\_\_\_\_ Current Annual Drainage Charge: \_\_\_\_\_

Telephone: \_\_\_\_\_

Commercial and Industrial Drainage Parcel Attached:    Yes    No

First Time Submittal    Yes    No

Comments: \_\_\_\_\_

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***Section 4. To be completed by the Engineer***

*The purpose of this checklist is to simplify the review process. This checklist gives the minimum requirements needed for an MSD review. All items shall be checked as included or marked N/A. The omission of required items may be cause for rejection of the submittal without review.*

- Approved Drainage Plan for the Property
- Drainage Areas Labeled for each BMP including both Impervious and Pervious Areas
- Volume below overflow elevation for each BMP
- Overflow elevation for each BMP
- Storm Sizing for each BMP (Storm Size (inches) that the BMP can capture and store)
- Infiltration Rates (if tests were conducted)
- Digital Data – ESRI-Shapefiles for the drainage areas and overflow lines into MSD system
- Memorandum of Agreement that has been completed, signed, and notarized (including Exhibit A & B)
- AND/OR Stormwater Quality Maintenance Agreement that has been completed, signed, and notarized (including Exhibit A)

*Please use this checklist for all Green Management Practices Stipend and Credit submittals.*

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*Section 5. To be completed by the Engineer*

|  |  |  |  |  |
|--|--|--|--|--|
| BMP Label (to match Agreement Exhibit A, location on site)** |  |  |  |  |
| BMP Type:  |  |  |  |  |
| Predevelopment Impervious Area (sf)                          |  |  |  |  |
| Predevelopment Pervious Area (sf)                            |  |  |  |  |
| BMP Footprint (sf)   |  |  |  |  |
| BMP Depth (ft) (to bottom of media storage layers)           |  |  |  |  |
| BMP Open Depth (ft) (depth of potential/standing water)      |  |  |  |  |
| BMP Storage Volume - Below Overflow (cf)                     |  |  |  |  |
| *Infiltration Rate (in/hr)                                   |  |  |  |  |
| Storm Size Capture (in)                                      |  |  |  |  |

\*If Applicable/used in design-provide copy of PE/PG report. BMP open depth (ft) (depth of potential exposed standing water)

\*\*Use additional copies of this sheet if necessary.

Comments: \_\_\_\_\_

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*The information contained in this request for review is, to the best of my knowledge, a complete and accurate statement of the property's conditions. The stormwater quantity and/or quality facility has been constructed in accordance with the Memorandum of Agreement/ Stormwater Quality Maintenance Agreement and the intent of the approved construction plans, and is functioning as intended and is well maintained. It is understood that MSD's approval of any credit requires that the facility be properly maintained by the property owner. MSD's staff will inspect the facility regularly. Failure to make corrections, or repeated incidents of failure to maintain the facility property, could result in loss of credit.*

\_\_\_\_\_  
Applicants Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Engineer's Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Engineer's Signature

\_\_\_\_\_  
KY PE #