



# LAWRENCEVILLE

GEORGIA

## CITY OF LAWRENCEVILLE STORMWATER FEE WAIVER APPLICATION

TO: The City of Lawrenceville Stormwater Utility Authority

DATE: \_\_\_\_\_

RE: Request to Waive Stormwater Utility Fees

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

UTILITY ACCT #: \_\_\_\_\_ TAX ID #: \_\_\_\_\_ SIZE OF PROPERTY: \_\_\_\_\_

REASON FOR WAIVER REQUEST:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Submit 7 copies of request to the Lawrenceville City Clerk’s Office, P.O. Box 2200, Lawrenceville, GA 30046. Normally requests will be heard on the 1st Wednesday of each month.

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(Internal use only)

Action of the Stormwater Utility Authority:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Chairman, Stormwater Utility Authority