

PORTAGE COUNTY STORM WATER APPLICATION
CUSTOMER ERU APPEAL APPLICATION

COMPLETED BY APPLICANT	APPLICANT INFORMATION	DATE:	APPLICANT NAME:
		PROPERTY ADDRESS:	CONTACT INFORMATION:
	APPEAL DETAILS	PARCEL TYPE (RESIDENTIAL, AGRICULTURAL, COMMERCIAL, ETC.)	
		PARCEL NUMBERS (IF KNOWN)	
		REASON FOR APPEAL	
<i>DISTRICT: FORWARD APPLICATION TO CONSULTANT FOR REVIEW</i>			

COMPLETED BY DISTRICT	REVIEW DETERMINATION	REVIEW DETERMINATION:	
		DATE:	REVIEWED BY:
	DISTRICT ACTION	DISTRICT ACTION:	
		DATE:	APPROVED BY: