

**Appeals Instructions**

1. This form is provided to customers who have reduced their Impervious Area coverage or who disagree with the Impervious Area determination by the Palmer Township Stormwater Authority (PTSA) for their property.
2. Please fill out all sections on the form, except for the last section marked "For PTSA Use Only".
3. You may attach supporting documentation to the form. Please note that any submitted documentation will not be returned to the customer. Please mail completed form to:

Palmer Township Stormwater Authority  
 3 Weller Place  
 Palmer, PA 18045  
 Attn: Stormwater Management Credit Administrator

4. A PTSA representative will review the Appeal Form within 60 days of receipt of the completed form.

**Appeal Information**

Impervious Area Estimate (optional): \_\_\_\_\_

**Customer Information**

Owner's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alt. Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

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

Account Number: \_\_\_\_\_

Parcel ID (if known): \_\_\_\_\_

Please provide a brief description as to why this change is necessary:  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR PTSA USE ONLY**

Date Received: _____	Appeal: <input type="checkbox"/> Granted <input type="checkbox"/> Denied
Date Reviewed: _____	Change to be Made: _____
Date of Application: _____	Reviewer: _____