



**City of Merriam Kansas
Stormwater Treatment Facilities
Cost Share Program
Application**

Property Owner:

Address:

City/State/Zip: **Merriam, KS**

Email Address:

Phone #:

Type(s) of Proposed Stormwater Treatment Facility (STF)

- | | | |
|--------------------------|-----------------------|-------------------------|
| <input type="checkbox"/> | Rain Garden | 50% match up to \$1,000 |
| <input type="checkbox"/> | Rain Barrels | 50% match up to \$75 |
| <input type="checkbox"/> | Native Tree Plantings | 50% match up to \$150 |
| <input type="checkbox"/> | Native Plantings | 50% match up to \$1,000 |

The following information must be attached to the application:

1. Summary or description of project.
2. Maps and/or site plans showing the location of project or area treated by STF.
3. Cost summary and/or contractors estimate for project.
4. Anticipated project schedule and expected completion date.

Estimated Amount of Project \$:

Reimbursement Amount Requested \$:

By participating in this program, you are agreeing to allow City of Merriam staff access to your property for the evaluation of the application, follow-up inspections of the completed project and verification of your continued maintenance of the project.

By signing this application, the property owner agrees to allow city staff access to the property, and that all information provided in this application and accompanying documents are accurate. The property owner also agrees to the conditions of this program, including the maintenance of the above-referenced STF for a period of three (3) years*.

**STF's are subject to applicable laws and provisions including but not limited to Merriam municipal code.*

Property Owner Signature: _____ Date: _____

FOR CITY STAFF ONLY

Received by:

Date:

All documents enclosed- Yes or No

Amount Requested \$:

Amount Approved \$:

Authorized By:

Date: