

**ARTICLE IX  
APPEAL PROCEDURES**

- 9.1. Any Owner who believes the provisions of these Rates, Rules, and Regulations have been applied in error may appeal in the following manner and sequence.**
- 9.2. An appeal of the rate and charge must be filed in writing with the Authority General Manager or the Manager's designee within thirty (30) days of the charge being mailed or delivered to the Owner. Any appeal must state the reasons for the appeal and be submitted using the forms provided by the Authority for such purpose. See Appendix B. If a User/Owner believes that the Authority's determination of the IA for their property is erroneous, they may file an IA Adjustment Appeal. It is the User/Owner's responsibility to demonstrate that the Authority's calculation of IA is erroneous and to provide the Authority with express, demonstrable information or documentation to support the appeal. Following submission of a *Stormwater Adjustment Appeal Form*, the Owner shall grant the Authority permission to enter the Owner's subject parcel to inspect the parcel to ensure that the information provided in the adjustment appeal accurately represents the current parcel conditions. There is no fee associated with submitting an adjustment appeal, however, the customer is solely responsible for any costs incurred in the preparation and submission of the adjustment appeal, and all required appeal documentation. No reimbursements or other costs shall be paid by the Authority regardless of the outcome of the appeal.**
- 9.3. Using information provided by the Owner-appellant, the Authority General Manager (or the Manager's designee) shall conduct a technical review of the conditions on the property and respond to the appeal in writing within sixty (60) days. In response to an appeal, the Authority General Manager may adjust the Stormwater Management Fee applicable to the property in accordance with the applicable provisions of a duly adopted Resolution. If the Authority General Manager fails to respond within sixty (60) days, the appeal shall be deemed denied. If the adjustment appeal results in a revised calculation of IA, then the Stormwater Management Fee will be corrected to reflect the revised IA determination for the next billing cycle and will include an adjustment to the existing month's Stormwater Management Fee.**
- 9.4. Any person aggrieved by any decision of the Authority, relevant to the provisions of these Rates, Rules and Regulations, may first appeal to the Board of Directors of the Authority by letter directed to the Authority General Manager setting forth the basis for the appeal and providing supporting information or documentation. If, still aggrieved after a decision of the Board, the aggrieved party may thereafter file an action in the Court of Common Pleas of Bucks County, as permitted by law.**

# Stormwater Adjustment Appeal

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## Appeal Instructions

This form is provided to Warminster Municipal Authority stormwater customers who believe the Impervious Area (IA) and/or Equivalent Residential Unit (ERU) calculation for their property is incorrect. Customers should also use this form if it is believed that stormwater fees have been assigned for a parcel the appellant does not legally own.

Please fill out all sections of the form, except for the last section marked "For Authority Use Only".

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:

**Warminster Municipal Authority ~ 415 Gibson Ave. ~ Warminster, PA 18974**

An Authority representative will review the Stormwater Adjustment Appeal Form within fourteen (14) business days of receipt of the completed form.

Approved adjustments will be applied to the current stormwater bill and all future billings.

## Appeal Information

Appeal Type:

ERU / IA  Ownership

Property Type:

Residential  Non-Residential

Customer IA / ERU Estimate (optional): \_\_\_\_\_

## Customer Information

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

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

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

Billing Street Address: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

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

Additional Supporting Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## For Authority Use Only

Date Received: \_\_\_\_\_ Appeal:  Granted  Denied

Date Reviewed: \_\_\_\_\_ Reviewer: \_\_\_\_\_

\_\_\_\_\_