

**CITY OF PEORIA, ILLINOIS
PUBLIC WORKS DEPARTMENT
STORMWATER UTILITY PROGRAM**

<i>City Reference No.</i>
<hr/>
<i>Date Received</i>
/ /

SWU APPEAL FORM

Property Owner Information (Please print or type)		SWU Account #:
Name:		
Mailing Address		
Street or PO Box #:		
City, State Zip Code:		
Telephone:		
Email Address:		
Property Information (Please print or type)		
Parcel Address (if different from above)		
Residential Property:	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Basis of Appeal
<p><i>Explain the basis of your appeal.</i></p> <ul style="list-style-type: none"> • <i>Do you believe the measured impervious area of your property is not correct? Please attach photos of the area you are appealing.</i> • <i>Has a building or pavement surface been removed or added that is not reflected in your bill? Please attach photos of the area you are appealing.</i> • <i>Something else? Please describe your appeal in the following space.</i>

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Signature of Owner:	Date:

Appeal Submittal Address

Submit Forms and supporting documentation to:
City of Peoria, Public Works Department
3505 N. Dries Lane
Peoria, IL 61604
ATTN: Stormwater Coordinator

SWU website: www.peoriastormwater.com
Email: stormwater@peoriagov.org
Phone: (309) 494-8800

City Evaluation of Appeal		PIN: _____
Is the customer appeal approved? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, what is the effective date of the revised SWU bill?		
Review by:	Appeal Approval Date:	
If the appeal is denied, inform the applicant in writing (by mail or email) the reason for the denial.	Denial Date:	