



Stormwater Division

287 McLaws Circle Suite 1, Williamsburg, VA 23185-5649
Phone: (757)259-1460

Email: stormwater@james-city.va.us
Fax: (757)259-5833

Stormwater Service Fee Review Request Form

Name: _____ Address: _____
Phone(s): _____ Fax: _____
Email: _____ Date: _____

I request a review of the stormwater service fee for the property located at:

Address: _____

Subdivision (if any): _____

Authorized Signature: _____

Print Name: _____ Title: _____

Applications must include the following to ensure timely review and processing.

1. A detailed explanation of why the fee on this property is incorrect. (Include a written summary and maps, photos, or other documentation.)
2. Confirmation that the Stormwater Service Fee has been paid in full and that the account is current (only required if request is submitted after December 5, 2007)

Code of James City County Section 18A-7. Adjustment of fees, exemptions, and credits.

(b) Any owner who has paid his/her stormwater service fees and who believes his/her stormwater service fees to be in correct may submit an adjustment request to the stormwater manager or his designee. Adjustment requests shall be made in writing setting forth, in detail, the grounds upon which relief is sought. Response to such adjustment requests, whether providing an adjustment or denying an adjustment, shall be made to the requesting person by the stormwater manager or his designee within 60 days of receipt of the request for adjustment. The stormwater manager shall have the authority to grant adjustments, as applicable. An appeal of the stormwater manager's final decision shall be made in writing within 30 days from the date of the final decision to the county administrator. The county administrator shall have the authority to review the stormwater manager's final decision and grant adjustments, as applicable. The final decision of the county administrator may be appealed to circuit court within 30 days from the date of the county administrator's final decision.

Please return via fax to (757)259-5833 or mail it to 287 McLaws Circle Ste 1, Williamsburg, VA 23185-5649

For official use only: Parcel Identification Number: _____