



# CITY OF RAPID CITY

## Public Works Department Engineering Services Division

300 Sixth Street  
Rapid City, SD 57701  
605-394-4154

### Application for Abatement of Stormwater Drainage Utility Fee Assessment Return application to Public Works Department (address above)

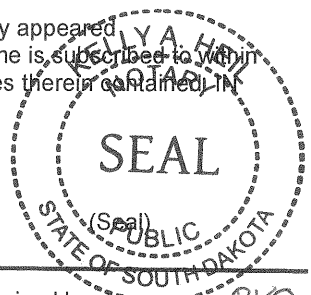
Owner Name CITCRA LLC  
Owner Mailing Address PO BOX 2192  
City Rapid City State SD Zip Code 57709  
Phone Number 341-4184  
Parcel Tax ID for requested abatement 68057  
Assessment year(s) to be abated 2019 Abatement amount requested \$ 1,099.54

Reason for requesting abatement of Stormwater Drainage Utility Fee:  
Property was annexed in 2018. It was assigned an Industrial use-type for the Stormwater Drainage Utility Fee based upon Pennington County's use designation of "Storage Warehouse" which is not characteristic of the amount of impervious surface on the property. Site Specific Fee = \$144.53. 2019 assessed fee based on Industrial Use \$1,244.07. Difference = \$1,099.54.  
the 2019 Rapid City Stormwater Drainage Utility Fee is collected by the Pennington County Treasurer with 2018 taxes.

Signature of Owner [Handwritten Signature] Date 1-29-19  
State of South Dakota )  
County of Pennington ) SS. [Handwritten Initials] **ACKNOWLEDGMENT**

On this the 29th day of January, 2019 (year) before me personally appeared William C. Freitag, known to me or satisfactorily proven to be the person(s) whose name is subscribed to within the foregoing instrument and acknowledged that he/she executed the same for the purposes therein contained. IN WITNESS WHEREOF, I hereunto set my hand and official seal.

[Handwritten Signature]  
Notary Public  
Comm. Expires: 10/05/2022



Please Do Not Write Below This Line

City Approval (if applicable) Date received by City 1/29/19 Received by BKQ

The contents of this written petition, having been before the governing body of the above named municipality, and having been considered by the same, the undersigned hereby certifies that FAVORABLE UNFAVORABLE action was taken at its meeting on \_\_\_\_\_ (date)

Amount approved to be abated \$ \_\_\_\_\_ City Finance Officer \_\_\_\_\_



EQUAL OPPORTUNITY EMPLOYER