

Stormwater Facility Maintenance Agreement Initiation Form

To begin the SWFMA review process,	please submit the following online at						
https://aca-prod.accela.com/CFW/Default	t.aspx: (Required for ALL projects)						
☐ One (1) Completed Stormwater Facility Maintenance Agreement Initiation Form (pdf)							
☐ One (1) Complete set of *Exhibits f	for the project (one .pdf)						
☐ One (1) Complete set of Metes and	d Bounds (pdf)						
☐ One (1) Complete Engineer's Chec	cklist with seal (pdf/doc)						
☐ Payment of \$635.00 (electronic che	eck only)						
*Exhibits must be clearly labeled as A, E be submitted on 8 ½" x 11".	B, C, D, etc.; do not use A1, B1, C1; etc. All attachments should						
Once your exhibits have been approve	ed, you will be asked to provide the following:						
. ,	orporation – If property owner is an entity						
☐ One (1) copy of the legally recorde	•						
, , -	nent stating the official who is listed as the authorized signer						
is able to do so on behalf of the owner	•						
<u> </u>	standing - If the entity submitting the SWFMA is not of State and is registered in another state						
	nwater Facility Maintenance Agreement with original						
* *	ity of Fort Worth with draft the contract and send it via						
Stormwater Facility Type:							
☐ Stormwater Detention	HOA: ☐ No ☐ Yes						
☐ Water Quality Device	Amendment: ☐ No ☐ Yes						
☐ Drainage Channel							
☐ Retaining Wall Maintenance							
☐ Other:							
IPRC Record Number:	Grading Permit Record Number:						
Drainage Study Number:							

I. PROJECT INFORMATION (Provide information for each box)

		•							
Project Name: *Must match name	e on agreement								
Project Address of	r Location:								
County:									
Legal Description:									
II. OWNER INF	ORMATION								
Owner Name: *Must match name	e on agreement								
Mailing Address:									
Phone Number:			E-mail:						
Applicant/Develop *Must match signa									
Contact Name:					Title	:			
Street Address:			City:			State:		Zip:	
Phone Number:			E-mai	l:					
IV. SIGNATORY	INFORMATION (f	or HOA if a	pplical	ole)					
Applicant/Develop *Must match signa									
Contact Name:					Title	:			
Street Address:			City:			State:		Zip:	
Phone Number:			E-mai	l:			•		•

V. CONTACT INFORMATION – For all correspondence regarding application

Contact Name:				Title:	
Phone Number:		E-mail:			
Description of Project s	Specific to Stormwater Facil	ity Mainten	ance A	greeme	nt: (Be as specific
VI.SIGNATURE					
Entity Name					
Signature					
Date					