Nisqually Reach Watershed Protection Area – O & M Program

Request for Correction of Rates and Charges

Property owners who believe the rates and charges assessed against their property for the Nisqually Reach Watershed Protection Area program are incorrect can request that they be corrected by submitting this form. To be considered for the 2014 tax year, this form must be submitted by May 30, 2013.

If the Environmental Health Division Director determines that the rates and charges assessed against your property are incorrect based on errors in billing, incorrectly identified property or the location of the on-site sewage system, the rates and charges will be corrected. No corrections will be made more than three years after the date payment was due without delinquency. Changes in the risk level on an on-site sewage system that result in adjustments to rates and charges assessed against any property shall be applied to future years, and no refund will be made.

Please provide the following information. Only complete requests can be reviewed. (Please print)

Property owner ______________________________________________ Phone number ____________________
Mailing address __________________________________________ City __________________ State _______ Zip ________
Property address __________________________________________ Tax Parcel # (11 digits) __________________

Please check the box that indicates why you believe the rates and charges determination for your property is incorrect:

☐ Property is not served by an on-site sewage system;

☐ Property drains away from Nisqually Reach;

☐ All portions of the wastewater system (including building plumbing) are outside the Nisqually Reach Watershed Protection Area;

☐ Risk determination of on-site sewage system (high-risk system or a low-risk system) is wrong.

Please check included information to support your request:

☐ Maps ☐ Photographs ☐ Other __________________________________________________________

Additional information: ____________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Please return this form to:

PUBLIC HEALTH AND SOCIAL SERVICES DEPARTMENT
Environmental Health Division
2000 Lakeridge Drive SW, Bldg 4  Olympia, WA  98502-6045
Phone: 360-867-2626   Fax: 360-867-2659   TDD: 360-754-2933

To request this form in an alternative format, please call 360-867-2626