



SWMF Credit Application
– Education Program

School Name: _____

Property Address: _____

Mailing Address: _____

Contact Person: _____

Phone Number: _____ E-Mail: _____

Utility Account Number(s) or Property Identification Number(s) (PIN) _____

Is this application for the renewal of credits: Yes ___ No ___. This form shall be used for both the initial application and the annual renewal.

Applicant's Signature: _____ Date: _____

Instructions: Applicant must provide adequate documentation to demonstrate to the City of Lancaster Stormwater Program that sufficient focus and instruction upon stormwater management issues and water quality protection are covered in the time frame suggested. Please summarize all appropriate documentation below, and attach additional supporting documentation. Attach additional sheets as necessary.

All Grade Levels Offered: _____ to _____ School Year: _____ to _____

Total Attendance of Students in School: _____

Program 1. Title: _____

Grade Level(s) in Program: _____

Percent of Total Students in Program: _____

Total Number of Students Served by Program: _____

Description of Program 1:

Program 2. Title: _____

Grade Level(s) in Program: _____

Percent of Total Students in Program: _____

Total Number of Students Served by Program: _____

Description of Program 2:

Program 3. Title: _____

Grade Level(s) in Program: _____

Percent of Total Students in Program: _____

Total Number of Students Served by Program: _____

Description of Program 3:

Complete and return this form and required attachments to:

SWMF Credit
Department of Public Works
120 North Duke Street, P.O. Box 1599
Lancaster, PA 17608-1599
Fax to (717) 291-4772 or email bhumble@cityoflancasterpa.com

Questions: Contact the Department of Public Works at (717) 291-4739