



Water Board Building
735 Randolph, Suite 806
Customer Service Division
Detroit, MI 48226
www.detroitmi.gov/dwsd

October 27, 2017

Estella Lanier
8827 Marygrove
Detroit, MI 48221

Dear Ms. Lanier:

Regarding: Account Number: 180-3398.300
Service Address: 16861 Wyoming St.

Thank you for allowing our office to review your concern. At the Detroit Water and Sewerage Department (DWSD), we take pride in ensuring our customer satisfaction.

We have completed our review of the above referenced account. It is our determination that the bill is correct. The usage was based upon actual reads, totaling **33** units of water usage which was reported via the AMR Technology.

In regards to your storm-water drainage charges, all customers in the City of Detroit has a cost associated with the transport and treatment of storm water runoff. Enclosed with this letter is a "**Questionnaire for Determination of Non-Residential Storm water Drainage**" form that should be completed and returned to our Storm Water Division. Once received, the department can then re-evaluate the storm water charges. I have also enclosed our Legal authority for Storm Water Runoff Charges.

If you are not satisfied with this determination, you may request an administrative hearing. Please visit one of our Customer Care Offices **within 10 days** of this letter to complete the hearing request form.

Thank you again for being a valued customer of the Detroit Water and Sewerage Department. If you have any questions or concerns regarding the enclosed information, do not hesitate to contact us at (313) 267-8000.


Sincerely,

Customer Service Administration

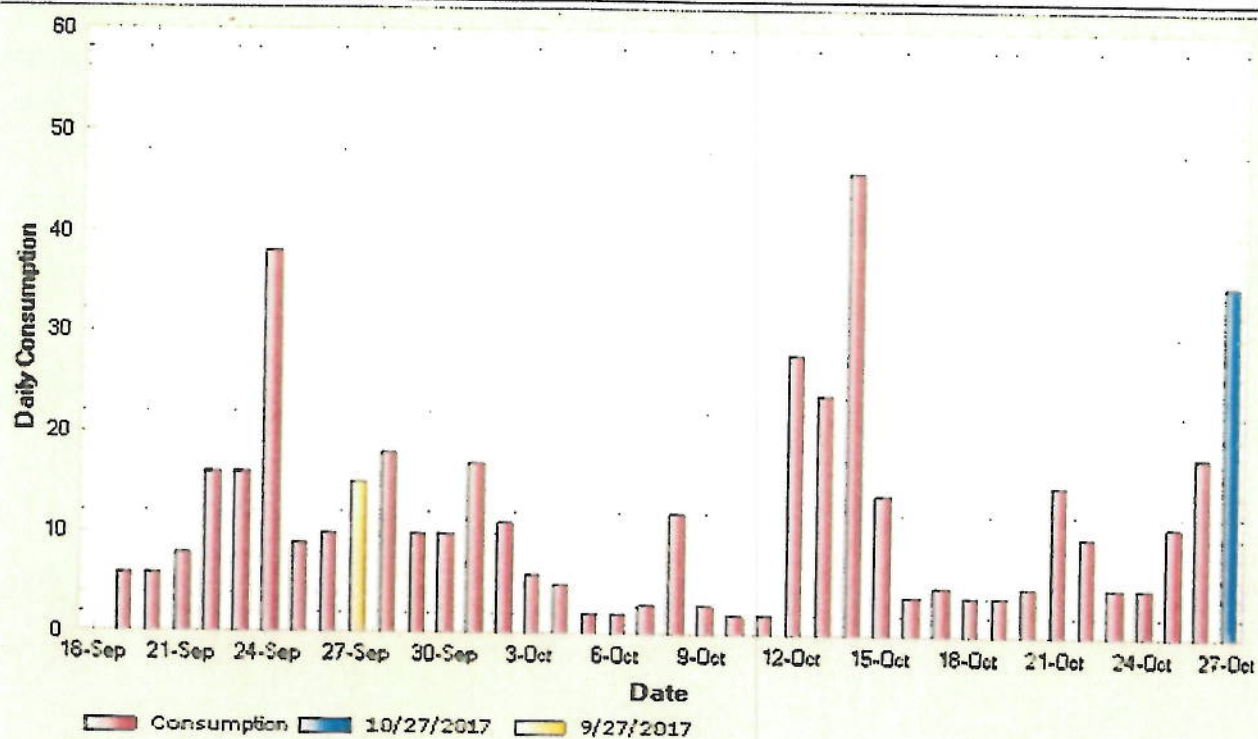
Customer Service Administration

Endpoint Properties

Properties	
Endpoint ID:	80370070
Channel #:	0
Account #:	1803398300
Premise ID:	755770000
Street Address:	16861 WYOMING ST
City & State:	DETROIT, MI
Meter ID:	13915257
Endpoint Type:	200W Single CH, Water Type 36
Status:	Active
Transformer ID:	
Report Date/Time	
Date/Time:	10/27/2017 2:36:46 PM

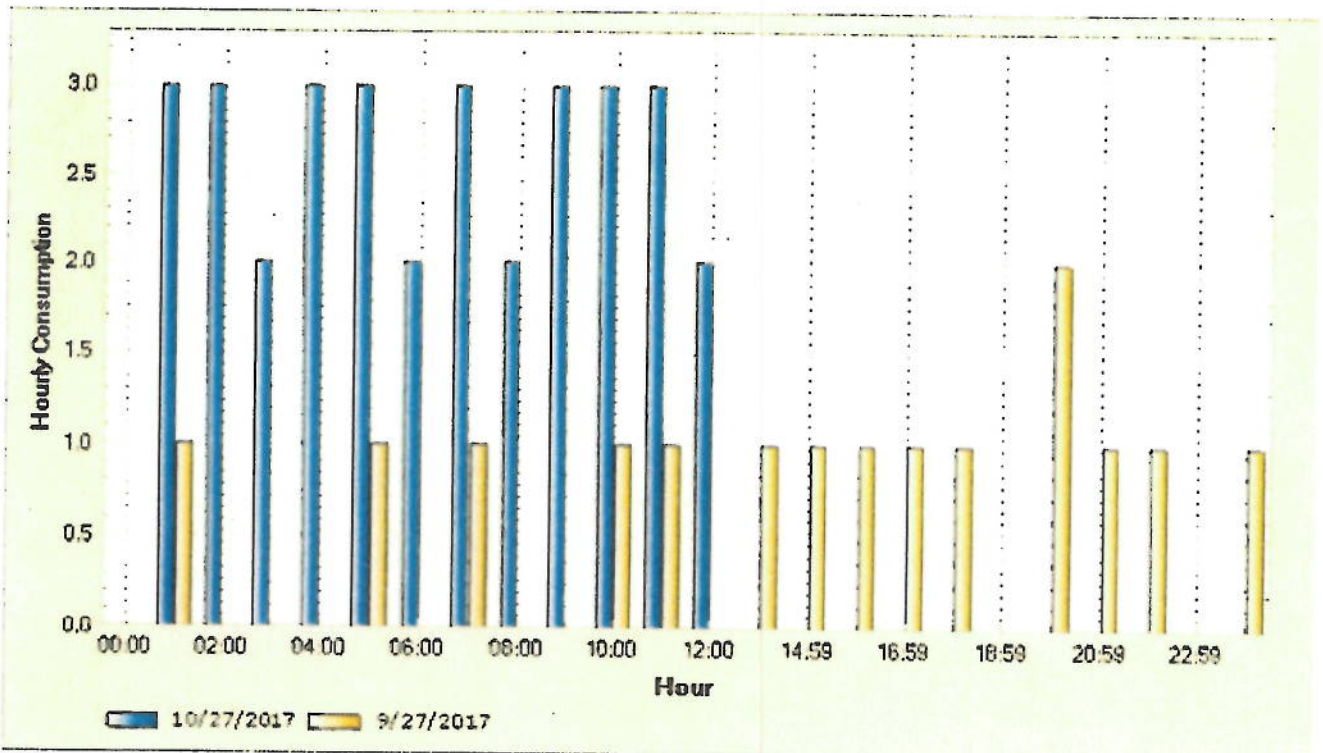
Readings	Reading	Comparison
Date:	10/27/2017	9/27/2017
Time:	12:25 PM	2:17 PM
Reading:	6168	5824
24hr Consumption:	50	11
Decode Type	75	75
On Demand Reading		
On Demand Read:		
Reading:		
Date/Time:		
Source:		
Status:		

Daily Consumption



Date	Reading Date/Time	Reading	Consumption
10/27/2017	10/27/2017 12:25 PM	6168	35
10/26/2017	10/26/2017 11:00 PM	6133	18
10/25/2017	10/25/2017 11:00 PM	6115	11
10/24/2017	10/24/2017 11:00 PM	6104	5
10/23/2017	10/23/2017 11:00 PM	6099	5
10/22/2017	10/22/2017 11:00 PM	6094	10
10/21/2017	10/21/2017 11:00 PM	6084	15

10/20/2017	10/20/2017 11:00 PM	6069	5
10/19/2017	10/19/2017 11:00 PM	6064	4
10/18/2017	10/18/2017 11:00 PM	6060	4
10/17/2017	10/17/2017 11:00 PM	6056	5
10/16/2017	10/16/2017 11:00 PM	6051	4
10/15/2017	10/15/2017 11:00 PM	6047	14
10/14/2017	10/14/2017 11:00 PM	6033	46
10/13/2017	10/13/2017 11:00 PM	5987	24
10/12/2017	10/12/2017 11:00 PM	5963	28
10/11/2017	10/11/2017 11:00 PM	5935	2
10/10/2017	10/10/2017 11:00 PM	5933	2
10/9/2017	10/9/2017 11:00 PM	5931	3
10/8/2017	10/8/2017 11:00 PM	5928	12
10/7/2017	10/7/2017 11:00 PM	5916	3
10/6/2017	10/6/2017 11:00 PM	5913	2
10/5/2017	10/5/2017 11:00 PM	5911	2
10/4/2017	10/4/2017 11:00 PM	5909	5
10/3/2017	10/3/2017 11:00 PM	5904	6
10/2/2017	10/2/2017 11:00 PM	5898	11
10/1/2017	10/1/2017 11:00 PM	5887	17
9/30/2017	9/30/2017 11:00 PM	5870	10
9/29/2017	9/29/2017 11:00 PM	5860	10
9/28/2017	9/28/2017 11:00 PM	5850	18
9/27/2017	9/27/2017 11:00 PM	5832	15
9/26/2017	9/26/2017 11:00 PM	5817	10
9/25/2017	9/25/2017 11:00 PM	5807	9
9/24/2017	9/24/2017 11:00 PM	5798	38
9/23/2017	9/23/2017 11:00 PM	5760	16
9/22/2017	9/22/2017 11:00 PM	5744	16
9/21/2017	9/21/2017 11:00 PM	5728	8
9/20/2017	9/20/2017 11:00 PM	5720	6
9/19/2017	9/19/2017 11:00 PM	5714	6
9/18/2017	9/18/2017 11:00 PM	5708	No Data
Hourly Consumption			



Hour	Hourly Consumption Reading Date (10/27/2017)	Hourly Consumption Comparison Date (9/27/2017)
12:00 AM	No Data	No Data
1:00 AM	3	1
2:00 AM	3	0
3:00 AM	2	0
4:00 AM	3	0
5:00 AM	3	1
6:00 AM	2	0
7:00 AM	3	1
8:00 AM	2	0
9:00 AM	3	0
10:00 AM	3	1
11:00 AM	3	1
12:00 PM	2	0
1:59 PM	No Data	1
2:59 PM	No Data	1
3:59 PM	No Data	1
4:59 PM	No Data	1
5:59 PM	No Data	1
6:59 PM	No Data	0
7:59 PM	No Data	2
8:59 PM	No Data	1
9:59 PM	No Data	1
10:59 PM	No Data	0
11:59 PM	No Data	1

Tampers

Tamper Description	Tamper Date/Time	Tamper Value	Previous Tamper Date/Time	Previous Tamper Value	Reading
Cut Cable	8/14/2017 8:03:41 PM	12	8/14/2017 4:03:37 PM	10	5394
Reprogram	1/8/2017 4:58:38 AM	1			4554
Tilt	7/23/2009 9:26:29 PM	0			456300
Security	7/23/2009 9:26:29 PM	0			456300

Errors and Warnings

- No errors or warnings

Identity: DWSD\flake.

INSTRUCTIONS

SECTION 1 – PROPERTY INFORMATION

- ① Name of the firm is the Business name.
(If this property is owned by a developer then place the company name here)
- ② Complete the service address, zip code, telephone number including area code and type of business
- ③ Indicate the parcel number and account number
- ④ Indicate the lot size which is also located in the actual deed or survey of the property

SECTION 2 – BUILDING INFORMATION

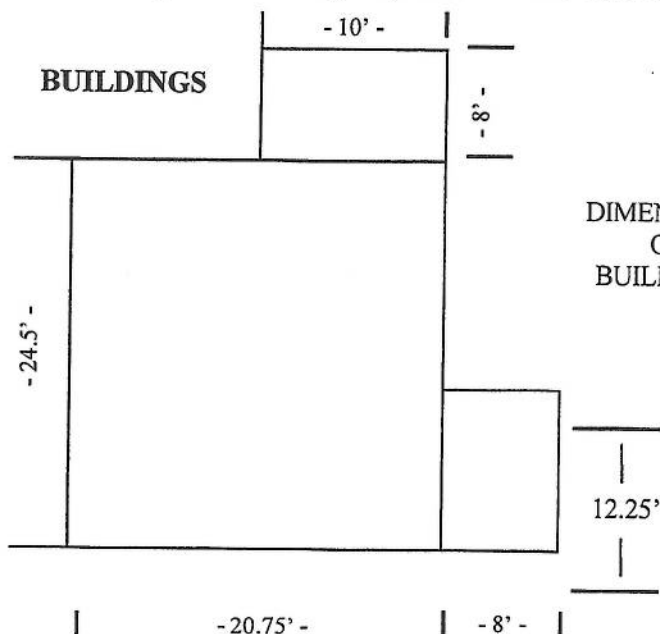
- ⑤ Indicate the size of roof (length x width) in feet
[Complete one box for each structure on the property. This section includes space for up to three buildings. If additional buildings are present, please attach additional form(s)]

SECTION 3 – PAVED / UNPAVED SURFACE INFORMATION

- ⑥ Indicate the area (length x width in feet) of driveway*/parking (concrete, asphalt, etc.), private sidewalks,* any patio/play area, and total area
*Include only sidewalks and driveways within the property line; do not include the public sidewalk or driveway in road or street right-of-way
- ⑦ Indicate the area of compacted soil, gravel, and other surfaces (pool, etc.)
(Please provide dimensions if 2 or more surfaces are checked)

EXAMPLE

If building is not rectangular, sketch dimensions or report dimensions as rectangular:



Size of Roof:

10	8
8	12.25
20.75	24.5
feet	x feet

To be completed by Applicant

I hereby certify that the information furnished above is true to the best of my knowledge.

Signed by _____

Title _____ Date _____

OFFICE USE ONLY

Date	Division	By	Remarks



Detroit Water and Sewerage Department
 735 Randolph Street, Room 806
 Detroit, MI 48226
 313.267.8000 | drainage@detroitmi.gov

DRAINAGE AND GREEN CREDIT PROGRAM IMPERVIOUS COVER SURVEY FORM

SECTION 1 – PROPERTY INFORMATION

1	Name of the Firm _____		
2	Address _____		
3	Parcel ID _____	Zip Code _____	(area code) Phone _____
4	Account Number _____		OFFICE USE ONLY
	Lot Size _____ feet	x _____ feet	
<i>(If other than rectangular, sketch all dimensions and angles on back of sheet)</i>			

SECTION 2 – BUILDING INFORMATION

BUILDINGS	1.	Size of Roof: Total _____ _____ feet x _____ feet	
	2.	Size of Roof: Total _____ _____ feet x _____ feet	
	3.	Size of Roof: Total _____ _____ feet x _____ feet	

SECTION 3 – PAVED / UNPAVED SURFACE INFORMATION

SURFACES	PAVED	Driveways/Parking Area _____ Sidewalks _____ Patio/Play Area _____ Total _____ _____ feet x _____ feet	
	UNPAVED	Gravel _____ Bare Compacted Soil _____ Other _____ Other _____ Total _____ _____ feet x _____ feet	

(Give dimensions if 2 or more surfaces are checked)
 (Over)



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735 Randolph Street, Room 806
Detroit, MI 48226
313.267.8000 | drainage@detroitmi.gov

Drainage Charge Adjustment Application
(Please fill out one form per property)

Contact Information (Please print or type)

Property Owner: _____

Mailing Address: _____

Phone: _____ Street Address _____ City _____ Zip _____
Email: _____

Must match owner name in Assessor's parcel database. If different than owner, must provide Power of Attorney or proof of tenant.

Service Location Information (Please print or type; use back if necessary)

Service Address: _____

Parcel ID and _____

DWSD Account No: _____

For Non-Residential Customers: Please provide copy of
Articles of Incorporation or equivalent document and EIN
or TIN Number: _____

Reason for Adjustment Request:

Feel free to provide a brief description of the adjustment(s) you are requesting in the space below. Refer to the following page for common appeal types and required back-up documentation.

Send completed application and supporting documentation to:

DWSD Drainage Charge Adjustment Program
735 Randolph Street, Room 806
Detroit, MI 48226

Alternatively, applications can be faxed to: 313.964.9110 or emailed to: drainage@detroitmi.gov

Additional questions? 313.267.8000 or email drainage@detroitmi.gov

Check one or more of the following and attach supporting documentation as applicable.

☐ **Ownership Adjustments (Check all that apply):**

- ☐ Incorrect Mailing Address: Send current owner and mailing address for parcel (if known)
- ☐ Property Sale: Copy of deed documenting property transfer **(Required)**
- ☐ Water Account Not Associated with Correct Parcel – Copy of water bill **(Required)**
- ☐ Other: _____

☐ **GIS Polygon or Impervious Area Adjustment or Impervious Classification Adjustment including Removal of Surface Classified as Impervious:**

- ☐ Original Total Impervious Coverage (sq. ft. or acres) **(Required):** _____
- ☐ New Total Impervious Coverage (sq. ft. or acres) **(Required):** _____
- ☐ Area of Classified Impervious Surfaces Removed (sq. ft. or acres) **(Required):** _____
- ☐ Description of Location of Classified Impervious Surfaces Removed **(Required):**

- ☐ Drawing, Sketch, or Plans with Location of Impervious Surface(s) Discrepancy Identified (With measurements) **(Required)**
- ☐ Site Photographs **(Required)**
- ☐ Drainage and Green Credit Program Impervious Cover Survey Form (Optional Tool to Aid in Impervious Cover Measurement)

Methods Used: (if customer removed surface classified as impervious) (Check All That Apply)

- ☐ Removal of paved surface
- ☐ Tillage of soil
- ☐ Soil amendments (e.g., mulch) added
- ☐ Landscaping/Plants added

***Note:** Property owners may not appeal the inclusion of gravel surfaces with evidence of vehicular traffic as an impervious surface on their drainage charge. Impervious area adjustments of **435 square feet** or less cannot be adjusted.*

☐ **Discharge to Surface Waters:**

- ☐ Drawings/Site plans with calculations attached **(Required)**
- ☐ Site Photographs **(Required)**
- ☐ MDEQ Permit **(If Applicable)**

Owner Certification and Right-Of-Entry

I certify that the above information is true to the best of my knowledge. I further understand that the DWSD drainage charge will be based on the information provided and the adjustment may result in an increase of the DWSD drainage charge. DWSD may revoke the adjustment if it later determines that the information provided is inaccurate. By signing below, I agree to allow DWSD drainage charge staff or inspectors on-site to review and verify the information above and in the case of restored soils, to visit the site periodically to confirm that restored soils remain intact and pervious.

Signature of Owner/Authorized Representative

Print Name

Date

DWSD Use Only

Drainage Charge Staff person Assigned: _____ Ext.: _____

Site Visit Conducted: Date: _____ Time: _____

Notes: _____

Corrected Impervious Surface Amount (sq. ft.): _____

Backdate Correction To: _____

Date Intermediary Correspondence Sent: _____

Date Sent to Billing for Corrections: _____ Contact: _____