

CITY OF MADRAS – SYSTEM DEVELOPMENT CHARGE DEFERRAL AND WAIVER APPLICATION

125 SW E Street, Madras, Oregon 97741

Telephone 541-475-2344

<https://www.ci.madras.or.us/>

APPLICANT INFORMATION	
Applicant Name (including DBA):	Telephone No.:
Applicant Mailing Address:	
CCB License No.:	Email:
DEVELOPMENT INFORMATION	
Property Address of Proposed Development:	Type of Development: <input checked="" type="checkbox"/> Single-Family Residential <input type="checkbox"/> Duplex <input type="checkbox"/> Triplex <input type="checkbox"/> Other Multi-Family
Property Owner (if different than Applicant):	Number of Units to be Constructed on the Property:
Owner Address (if different than Applicant):	Legal Description:
SDC DEFERRAL AND WAIVER REQUESTS	
Defer Payment of System Development Charges ("SDC(s)") Applicable to the Property: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Type(s) of SDC Waiver(s) Requested: <input checked="" type="checkbox"/> Single-Family, Duplex, and/or Triplex Initial 25% Waiver <input type="checkbox"/> Single-Family, Duplex, and/or Triplex Conditional 25% Waiver for Unit Sold (Valued) at \$240,000.00 or Less <input type="checkbox"/> Multi-Family 75% Waiver	
ADDITIONAL INFORMATION	
By signing below, the undersigned Applicant (or authorized agent) hereby declares under penalty of perjury as follows: (a) all information contained in this application is true, accurate, and complete; (b) Applicant agrees to pay all applicable SDCs in accordance with the City of Madras System Development Charge Ordinance; (c) Applicant will enter into the applicable City of Madras SDC waiver and/or deferral agreement and pay the prescribed processing fees to City contemporaneously with submission of this application; (d) Applicant is not in default (and has not defaulted) under any SDC waiver and/or deferral agreement with City; and (e) Applicant will promptly submit all documentation and/or information City deems necessary or appropriate to process this application and Applicant's SDC waiver and/or deferral request(s) herein.	
Applicant Signature:	Date:
<i>NOTE: This application will not be deemed complete unless and until Applicant delivers the following to City: (a) the processing fees; and (b) a copy of a title report, preliminary title report, or lot book report for the Property, or such other documentation and/or evidence City deems necessary or appropriate to determine ownership of the Property. An incomplete application will be returned to Applicant.</i>	
FOR CITY USE ONLY	
<i>Please sign below, indicate approval or state why you disapprove, and provide any additional comments.</i>	
Community Development Department	
Approve Request: Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
Signature:	Date:
Finance Department	
Processing Fees Received: Yes <input type="checkbox"/> No <input type="checkbox"/>	Receipt No.:
Approve Request: Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
Agreement Executed: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date of Agreement:
Signature:	Date:

