

Application For Development Impact Fee Deferral Program

Eligibility for this program is defined in the City's Development Impact Fee Deferral Program Guidelines. The following requirements must be satisfied prior to the execution of a fee deferral agreement:

- 1. Submittal to the City of a completed fee deferral application; and
- 2. Approval of the fee deferral application by the Community Development Director; and
- Provision of adequate security securing the repayment through the recordation of a Fee Deferral Agreement; and
- 4. Payment of the administration fees (in accordance with the City's Comprehensive Fee Schedule) and/or recordation costs, if applicable

In no event shall a certificate of occupancy for an approved eligible project be issued until either of the following occurs:

- a. Payment of all applicable impact fees due; or
- b. Execution of a fee deferral agreement pursuant this Program

| PROJECT/PERMIT | | | |
|---|----------------------------------|--|--|
| Location Of Project (Address): Click or tap here to enter text. | Project Description: | | |
| | Click or tap here to enter text. | | |
| Subdivision Name: Click or tap here to enter text. | | | |
| Lot Number: Click or tap here to enter text. | | | |
| Assessor's Parcel Number(s): Click or tap here to enter text. | | | |

| REAL PROPERTY OWNER | | | | |
|---|--|--|--|--|
| Property Owner Name (Signature Required Below) Enter text here. | Cell Home Business Fax Enter text here. | Cell Home Business Fax Enter text here. | | |
| Address, City, State, Zip: Click or tap here to enter text. | | | | |
| Email Address: Click or tap here to enter text. | | | | |

| APPLICANT | | | | |
|--|--|--|--|--|
| Applicant Name (Signature Required Below) Enter text here. | Cell Home Business Fax Enter text here. | Cell Home Business Fax Enter text here. | | |
| Applicant Address, City, State, Zip: Click or tap here to enter text. | | | | |
| Applicant Representative Name Enter text here. | Cell Home Business Fax Enter text here. | Cell Home Business Fax Enter text here. | | |
| Applicant Representative Address, City, State, Zip: Click or tap here to enter text. | | | | |

| DOCUMENTS | | | |
|-----------|---|----------|--|
| Required | Documents For Signatures | Received | |
| | = | | |
| | Assessor's parcel number/address/subdivision and lot listed and verified (legal description obtained from title company | | |
| | Vesting deed/grant deed verifying ownership attached | | |
| | Estimated impact fees listed with pending receipts attached (***you must obtain the most current versions of these receipts from he Building Department***) | | |

ESTIMATED IMPACT FEE INFORMATION *Do Not Write Below This Line (To Be Completed By Department Staff)*

NOTE: The actual amount of fees deferred will be calculated pursuant to the Fee Schedule in effect at the time the fees are due, and applicant will be required to execute a promissory note and deed of trust for that amount at that time.

| Type of Fee | Amount |
|---|-------------------------------------|
| General Government Impact Fee | \$ Click or tap here to enter text. |
| Fire Impact Fee | \$ Click or tap here to enter text. |
| Parkland In-Lieu Fee | \$ Click or tap here to enter text. |
| Parks & Recreation Impact Development Fee | \$ Click or tap here to enter text. |
| Police Impact Fee | \$ Click or tap here to enter text. |
| Transportation Impact Fee | \$ Click or tap here to enter text. |

IMPACT FEE SECTION STAFF APPROVAL:

Signature (Print Name): Click or tap here to enter text.