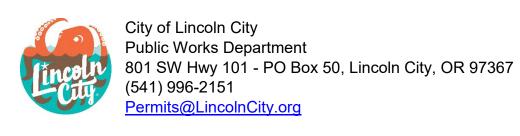
Last Revised Date: 08/09/2024



## APPLICATION FOR SYSTEM DEVELOPMENT CHARGES (SDC) "PAY LATER OPTION" FOR MULTI-UNIT RESIDENTIAL PROJECTS

Applicant Name(s):	
Phone Number:	
Mailing Address:	
-	
Property Address (if different):	
, , , ,	
Tax Lot ID:	
Property Owner Name(s):	
Phone Number:	
Building Permit Number (if applicable):	Number of Dwelling Units:
Project Description:	

- The "Pay Later Option" is available ONLY to residential structures, attached to one another, with 3+ units (commercial building code), located on one legal tax lot. [Ineligible projects include: detached residential units, cottage cluster or tiny homes developments, condominiums, fee-simple townhomes on separate individual tax lots.]
- If applicable, an Administration Fee will be due as outlined in the current City of Lincoln
  City fee schedule and must be paid with the submission of this application. Upload this
  document to your Building Permit Application.
- Sewer, Transportation and Water SDCs will be calculated based on the fee schedule in effect as of the date of payment (not at the date of this permit application). These fees can be paid any time prior to the request of a Final Planning and Public Works Department Inspection.
- This Application for the "Pay Later Option" is for City-collected SDCs only. As a property owner, you will be responsible for payment of all SDC fees prior to Certificate of Occupancy. If SDC fees are not paid beyond non-permitted occupancy, those and any associated administration fees (including County Recording Fees) would be considered "past due" and a City lien would be placed on the property at the property owner(s) cost.

Last Revised Date: 08/09/2024

## **Declaration and Signature**

I hereby elect the System Development Charges (SDCs) "Pay Later Option." I certify that all information provided in this application and all information furnished in support of this application is given for the purpose of the "Pay Later Option" of SDCs and is true and complete to the best of my knowledge and belief, and that I have taken steps to verify the information submitted. I agree to enter into a binding agreement as a condition of this Option. I agree to pay the SDCs owing at the time of final inspection by Planning and Public Works. I understand and accept the terms and conditions of these payment options as they are described on page 1, and in accordance with City of Lincoln City Ordinance 2024-07. Occupancy of the development before payment of the applicable SDCs, and completion of all inspections, is prohibited. Failure to pay SDCs may result in withholding of Certificate of Occupancy which may include a lien on the property. If I fail to properly execute any of these documents, the full SDCs are due and payable at the time the building permit is issued by the City.

I am the owner of the real property identified above. I authorize the above applicant to submit this application for the "Pay Later Option" for SDCs and I understand I can be held responsible for payment of SDCs due and owing for the development proposed by the applicant, which if not paid, may include a lien on the property identified above. I give my consent for this application for a "Pay Later Option" for SDC fees. If jointly owned, all owners must sign before a Notary.

Property Owner Signature	Printed Name Address: City, State, Zip:		
State of			
County of			
Signed and acknowledged before me this day of	, 202by(name of individual)		
	Notary Public My Commission Expires:		
 Property Owner Signature	 Printed Name		
	Address:		
	City, State, Zip		
State of			
County of			
County of Signed and acknowledged before me this day of	, 202by (name of individual)		

Last Revised Date: 08/09/2024

## **Declaration and Signature** (cont'd) **Property Owner Signature** Printed Name Address: City, State, Zip: State of \_\_\_\_\_ County of Notary Public\_ My Commission Expires:\_\_\_\_\_ **Property Owner Signature** Printed Name Address: City, State, Zip: State of \_\_\_\_\_ County of Signed and acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 202\_\_\_by \_\_\_\_\_(name of individual)

Applicant Signature	Printed Name

Date:

## For City Use Only

My Commission Expires:

City Manager Signature

Date

Notary Public