



City of Bend  
Development Services Division  
710 NW Wall Street, Bend OR 97703  
(541) 388-5580  
development@bendoregon.gov

## APPLICATION FOR SYSTEM DEVELOPMENT CHARGES (SDC) DEFERRAL

Applicant Name(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Subject Property Address: \_\_\_\_\_

Tax Lot ID: \_\_\_\_\_

Property Owner Name(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Permit Number (if applicable): \_\_\_\_\_

Project Description: \_\_\_\_\_

- An Administration fee, if applicable, will be due as outlined in the current City of Bend 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 this permit application. A 2% recovery fee will be added to the total due. These fees can be paid any time prior to the request of a Final Building Inspection.
- This deferral form is for City SDCs only. Bend Park and Rec District (BPRD) SDCs will be calculated based on the fee schedule in effect at the time of Certificate of Occupancy. An agreement will be required to defer BPRD SDCs only. Once your application is processed, we will provide agreement information to you and you will work with BPRD directly to complete your agreement. Contact BPRD at [finance@bendparksandrec.org](mailto:finance@bendparksandrec.org) for more information. You will need to upload your finalized agreement prior to Certificate of Occupancy



### Accommodation Information for People with Disabilities

To obtain this information in an alternate format such as Braille, large print, electronic formats, etc. please contact the Development Services Division at [development@bendoregon.gov](mailto:development@bendoregon.gov) or (541) 388-5580; Relay Users Dial 7-1-1.

## Declaration and Signature

I certify that all information provided in this application and all information furnished in support of this application is given for the purpose of deferring payment 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 pay the SDCs owing plus the cost recovery fee at the time indicated on this form. 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 Bend Municipal Code (BC) 12.10.105. Occupancy of the development before payment of the applicable SDCs is prohibited. Failure to pay SDCs may result in withholding of certificate of occupancy and/or penalties as outlined in BC 12.10.190, which may include a lien on the property.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Printed Name

I am the owner of the real property identified above. I authorize the above applicant to submit this application for deferral of SDCs and I understand I can be held responsible for payment of SDCs due and owing for the development proposed by applicant, which may include a lien on the property identified above. I give my consent for this application for an SDC Deferral.

\_\_\_\_\_  
Property Owner Signature

(if jointly owned, all owners must sign – if owned by an entity, must provide proof of authority to bind the entity)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Property Owner Signature

(if jointly owned, all owners must sign)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Property Owner Signature

(if jointly owned, all owners must sign)

\_\_\_\_\_  
Printed Name



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