

**Affordable Housing**

**System Development Charges**

**Exemption Application**

**Primary contact:** 

**Company name (Legal Owner):** 

**Company mailing address:** 

**Phone #:**  **Email**: ****

**Project name:** 

**Project location (tax lot or address):** 

**Are you receiving City of Bend affordable housing funding for this project?**

Yes No **Type of Bend affordable housing funding awarded: **

**Target AMI:** 

**Are you willing to permanently deed restrict the development as affordable?**

Yes  No  Partial

**If no or partial, provide additional explanation (include planned length of deed restriction):**



**Developer Characteristics:**  For Profit  Non-profit  Other (describe): 

**Description of project:** 





**Proposed water meter size(s) if development will be served by City of Bend water:** 

**Number of affordable units to be sold:**  **Number of affordable units to be rentals:** 

**Estimated Timeline:** Pre-app Meeting Date: Click or tap to enter a date.

Expected construction start date:Click or tap to enter a date. Expected COO:Click or tap to enter a date.

Assigned City of Bend Planning staff:  Building Permit Number: 

**Development Description (attach additional documentation if needed):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type** | **Quantity of Affordable Units** | **Square Footage of Each Affordable Unit** | **Bedroom Count of Each Affordable Unit** | **Quantity of Market Rate Units** |
| **Detached Single-Unit Dwellings on Individual Lots** |  |  |  |  |
| **Attached Single-Unit Dwellings (Circle one: Townhomes or Condominiums)** |  |  |  |  |
| **ADUs** |  |  |  |  |
| **Duplexes** |  |  |  |  |
| **Multi-Unit (Triplex, Quadplex, Apartments)** |  |  |  |  |
| **Micro-Units** |  |  |  |  |
| **Small Unit Dwellings** |  |  |  |  |
| **Cottages** |  |  |  |  |

**Please submit completed application and estimated recording fee to**

**Housing Department, 710 Wall Street, Bend, OR 97703**