



CITY OF BEND

# Affordable Housing Developer Incentives Program Expedited Permitting Application

Primary Contact: \_\_\_\_\_

Company name (Legal Owner): \_\_\_\_\_

Mailing address: \_\_\_\_\_

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

Project name and Location: \_\_\_\_\_

Stage of development requesting to be expedited: \_\_\_\_\_

**Development description:**

- Single family detached
- Duplex/Triplex
- Multi-family
- Mixed use
- Other (describe): \_\_\_\_\_

Total # of residential units: \_\_\_\_\_

# of affordable residential units: \_\_\_\_\_

**Units are intended for:**

- Individual ownership
- Shelter
- Rental
- Combination(describe): \_\_\_\_\_

**Target AMI:**  80% or less  60% or less  50% or less  Other (describe): \_\_\_\_\_

Combination (describe): \_\_\_\_\_

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

**What agencies are funding your project and the approximate amount?**

Agency	Funding Amount

*Please attach a copy of the completed funding applications and award letter(s) or other proof of funding.*

**Please submit application to the Housing Department at  
housing@bendoregon.gov or mail to Housing Department PO Box 431, Bend, OR 97709**