



## Acknowledgement of Terms and Conditions for Exemption of System Development Charges

Name(s) of property  
owner(s): \_\_\_\_\_

Address or property  
account number(s) of  
project site: \_\_\_\_\_

Permit number(s) (if  
known): \_\_\_\_\_

I acknowledge that, as a condition of receiving an exemption from system development charges as provided in Portland City Code Section 17.14.070 J., I must agree to one of the following (check only one option):

- For new housing units in a new building:** I will commence construction and receive, within one year of the issuance date of my permit(s), an approved foundation/concrete pour inspection.
- For new housing units in an existing building:** I will commence construction and receive, within one year of the issuance date of my permit(s), an approved insulation and vapor barrier inspection.
- I am submitting a construction completion guarantee from an accredited financial institution as defined in City administrative rules.

or

- I choose not to receive this exemption from system development charges.** I will pay the system development charges assessed to my permit(s) that would otherwise qualify for this exemption.

By signing below, I acknowledge that I have read and understand the provisions of Portland City Code Section 17.14.070 J. (“Temporary exemption for residential housing projects”) and my obligations therein. I acknowledge that the City has the authority to enforce those provisions, including but not limited to Subsection 3 (“Failure to meet construction milestone”) and Subsection 4 (“Future change of use or occupancy”). I acknowledge that any failure to meet the requirements of the aforementioned Code section may result in the revocation of this temporary exemption and require the prompt payment of outstanding system development charges.

If I choose not to receive the system development charge exemption, my signature below affirms this, and I agree to pay the system development charges assessed to the permit(s).

Signature of property owner \_\_\_\_\_

Date signed \_\_\_\_\_

Preferred contact information  
(email address or phone  
number): \_\_\_\_\_

Please complete and sign this form and submit it via email to [PSTempSDCExemptions@portlandoregon.gov](mailto:PSTempSDCExemptions@portlandoregon.gov).