EXHIBIT B

City of Portland, Oregon Assessment Loan Program Request to Cancel SDC Installment Payment Contract

TO: NAME STREET ADDRESS CITY/STATE/ZIP Date: 00/00/94 Account Number: 00000 Tax ID Number: R00000000

I hereby request the City of Portland, Oregon to cancel the System Development Charge installment payment contract described as follows:

Lien Account Number: XXXXX

Property ID Number: R00000000

Site Address:

STREET ADDRESS

Legal Description: XXXXXXXXX Terr

Block: X Lot: X

Project Description: XXXX Systems Development Charge

I acknowledge that I relinquish this opportunity to finance my special assessment at the current financing fees and charges, and for the terms and conditions contained in the contract described herein.

I understand that the property will be subject to System Development Charges at the rates and charges in effect at such future time that I or a future property owner elects to finance such special assessment. The rates and charges will be recalculated by the City at such time that these charges are to be paid or financed.

I understand that the property will be subject to City financing fees, charges, terms and conditions which are in effect at such future time that I or a future property owner elects to finance the special assessment.

In consideration for this request, I agree to pay all non-refundable financing fees and a cancellation charge. The total of these fees and charges is \$XXX.XX.

Signed:

Date:

Signed:

Date: