

PAYBACK AGREEMENT APPLICATION

Updated Jan 2020

Physical Address: Auburn City Hall Annex, 2nd Floor 1 E Main St Mailing Address: 25 W Main St Auburn, WA 98001-4998 Webpage & Application Submittal: www.auburnwa.gov applications@auburnwa.gov Phone and Email: Phone: (253) 931-3020 permitcenter@auburnwa.gov

PROJECT INFORMATION					
Date:			FAC	_ GRA	
Project Name:					
Project Site Addres	s:				
Project Parcel #(s):					
APPLICANT					
Company Name: _					
Authorized Representative(s):	Individual	Corporation	·	LLC	
Title(s):					
Phone/Email:					
Mailing Address: _					
_					
c	City:	Stat	te: Zip: _		
PROPERTY OWN	ER(S)				
Name(s):					
Address:					Zip:
ENGINEER					
Company:					
Address:		City:		State:	Zip:

	IDED CURNITAL C					
REQU	IRED SUBMITTALS					
follov	each Payback Agreement included with this Application, su ving information electronically (in the specified format) to <u>a</u> de the FAC or GRA project number in the Subject line:			<u>∨</u> , and	Format	
•	Estimated project expenses for the portion of the project Agreement: including construction costs (itemized bid project costs, engineering costs (design, surveying, geotechnical applicable City permit fee. (Note: final costs must be sufficiently acceptance of all improvements constructed as particular and the project control of the project costs.	roposal), co cal, as-built d submitted wit	ntract adminis rawings), and hin 120 days	stration d	Excel	
•	Map of proposed payback area showing both the devel parcels that benefit ("benefited properties") from the fac Agreement				JPG	
•	Legal description of development project's parcel(s), by	tax parcel n	umber	Word		
•	Legal description of benefited properties, by tax parcel	number			Word	
•	Proposed payback methodology and estimated amounts for each benefited property			erty	Excel	
•	Current owner names and addresses of the benefited properties				Word	
APPLI	CATION (for each eligible utility or street)					
		Water	Sewer	Storm	Streets	
	ch Payback Agreement that I am applying for (mark all ply), I acknowledge and agree:					
ŕ	That the selected payback agreement(s) may extend for the indicated period (unless extended as provided for by statute), from the date the agreement is accepted and executed by the city.	20 years	20 years	20 years	15 years	
,	That the recovery of costs shall be assigned to run with the land.					
ŕ	To waive any claims arising from or related to liability on behalf of the City in establishment and enforcement of payback agreements, and acknowledge that the City is not responsible for locating a beneficiary or survivor.					
,	To provide sufficient security to ensure the completion of the facilities that are the subject of the Payback Agreement.					
is corre	that I have read this application and declare under penalty ect and complete. I am either the owner of the property on t d above and am acting with the owner's full knowledge and	his permit ap				
Signat	ure:		Da	te:		
Printed	d Name:		Da	te:		



PAYBACK AGREEMENT APPLICATION LETTER OF AUTHORIZATION

Updated Feb 2019

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declare under penalty of perjury under the laws of the

(A copy of this letter must be submitted for each property owner involved)

undersigned, and filed against the City of Auburn, but only where such claim arises out of the	State	of Washington as follows;					
to act as my agent regarding this application. 3. All statements, answers, and information submitted with this application are true and correct to the best of my knowledge and belief. 4. I agree to hold the City of Auburn harmless as to any claim (including costs, expenses and attorney fees incurred in the investigation of such claim) which may be made by any person, including the undersigned, and filed against the City of Auburn, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information provided to the City as part of this application. 5. I hereby grant permission for representatives of the City of Auburn and any other Federal, State, local unit of government with regulatory authority over the project to enter onto my property inspect the property, take photographs, and post public notices as required in connection wireview of this application and for compliance with the terms and conditions of permits and approvation issued for the project. Signature: Date: Date: City and State where signed: Address:	1.	I am the owner of the property that is the sub	ject of the application.				
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City and State where signed: Address:	Signa	ture:					
Address:	Printe	d Name:	Date:				
	City a	nd State where signed:					
City: State: Zip:	Addre	ss:					
	City:	State: Zip: _					