

**APPLICATION FOR DETERMINATION OF ELIGIBILITY FOR LIMITED TAX ASSESSMENT
RENTAL REHABILITATION**

Portland Development Commission

Application No. _____ Application Fee \$ _____

Date Received _____ Appraisal Fee \$ _____

APPLICANT: PLEASE COMPLETE BOUNDED BY DOUBLE LINES (Print in ink)

Number and Street _____

Between (cross streets) _____

Tax Account Number R- _____

Lot _____ Block _____ Addition _____

Occupied as owner occupied _____; Rental _____; # Family Units _____

Property Owner's Name(s) _____ Telephone (day) _____

Property Owner's Address _____

Please read carefully and sign below:

1. I am aware of all requirements for limited assessment imposed by ORS 308.450-481 and implemented by Chapter 3.102 of the Portland Code.
2. The above-described property qualified or, upon completion of the rehabilitation improvements, will qualify for limited assessment.
3. I agree to negotiate with the Portland Development Commission the rate to be charged for the rehabilitated rental units during the period of limited assessment.
4. I am responsible for compliance with and will comply with the Code of the City of Portland regardless of whether I obtain the assessment provided by this chapter.
5. I will arrange for the inspection to be carried out within 30 days of the acceptance of this form. Please call 503 823-3400 ext 3.
6. I am aware that approval of this Application for Determination of Eligibility will not constitute final entry into the Limited Tax Assessment Program. I will be responsible for obtaining an approved Certificate of Qualification from the Portland Development Commission upon completion of property rehabilitation.

Applicant's Signature _____

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(for office use only)

- A. Single Family ___ Multi-Family _____ Owner occupied ___ Not owner occupied X
- B. 1. Year building erected _____
2. Year building converted for this use _____
3. Age of building on 1/1/86, _____
- C. 1. Number of Units in building _____
2. Number of units in building in transient occupancy _____
3. % of units in building in transient occupancy _____
- D. The above identified property does not comply with the following section of Title 29 and/or Chapter 13A of Title 24: (Detailed letter enclosed)

Reviewed by _____ Date _____

In accordance with Chapter 3.102 of the Portland Code it is estimated that the maximum appraisal fee for the above property will be \$ _____.

Reviewed and approved for the Multnomah County Assessor;

Tax Account No. _____

By _____ Date _____

This property has been found to meet the criteria for acceptance into the Limited Tax Assessment Program, Final entry into the program will occur upon completion of the rehabilitation and approval of the application for Certificate of Qualification.

By _____ Date _____
Portland Development Commission

PLEASE NOTE:

Approval of this application for Determination of Eligibility does not constitute final qualification for the Limited Tax Exemption Program. This document indicates only that the property has met the eligibility criteria for the program. Construction must be completed and the appropriate documents and fees submitted to the Portland Development Commission before the program can take effect.