

## APPLICATION TO PAY ASSESSMENT IN INSTALLMENTS

CLACKAMAS COUNTY, OREGON

DATE: \_\_\_\_\_

The undersigned owner(s) of the following described property: \_\_\_\_\_ (Insert Tax Lot #)  
hereby apply to Clackamas County Service District No. 1 to pay the unpaid balance of the assessment  
levied against the above-described property in installments as provided below.

The unpaid balance of the assessment is \$ \_\_\_\_\_. The assessment was levied for the  
improvements in Assessment District 2009-1 of Clackamas County Service District No. 1, a project  
involving the construction of lateral sewers, street mains and similar facilities including easements and  
rights-of-way, pursuant to the provisions of ORS 223.205 to 223.295 (Bancroft Bonding Act) and the rules  
and regulations of Clackamas County Service District No. 1.

The undersigned agree(s) to pay this assessment in forty (40) consecutive, equal, semiannual installments  
of principal, plus interest on the unpaid balance at the rate described below. The rate of interest on the  
unpaid balance shall be five percent (5%) per annum from the date of Board of Clackamas County  
Commissioners Order Number 2013-26, adopted on May 2, 2013. The first installment payment will be  
due by August 1, 2013, and subsequent installment payments will be due on each subsequent February  
1<sup>st</sup> and August 1<sup>st</sup>. All delinquent payments shall bear interest at the same rate per annum.

The undersigned, on behalf of the current owners of the property and all subsequent owners, hereby:  
(1) waive(s) all irregularities or defects, jurisdictional or otherwise, in the proceedings to cause such  
improvement to be constructed or made for which the assessment is levied, in the apportionment of the  
costs thereof and in the levy of the assessment; and, (2) agree(s) that if any installment is not paid as it  
becomes due and payable, then Clackamas County Service District No. 1 may declare the whole unpaid  
balance, both principal and interest, due and payable at once, and may proceed at once to collect all  
unpaid installments and to enforce collection thereof with all penalties and costs added thereto by  
foreclosure of the assessed property or in any other manner provided by law.

IN WITNESS WHEREOF, (I) (We) have set my (our) hand(s) on the day and year first herein above  
written.

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Mailing Address: Street City State ZIP

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**Safety Net Grant Program for Assessments**

\_\_\_ Yes, I am/we are interested in applying for the 2013-14 Safety Net Grant Program for Assessments.