



FEE WAIVER POLICY

Effective January 4, 2006, the Deschutes County Board of Commissioners approved Ordinance Nos. 2006-001, 2006-002 and 2006-003, delegating authority to administer and approve septic permit, building permit, and land use permit fee waiver requests to the Community Development Director and County Administrator (DCC 13.08, 15.04.160 and 22.08.010).

The Board of County Commissioners of Deschutes County has delegated full authority to the Community Development Department (CDD) Director to administer this policy, with the exception of Items #4, #5 and #6.

POLICY GUIDELINES:

1. To resolve code compliance cases, the CDD Director can make a finding that it is less expensive for the County to resolve the case through a full or partial fee waiver than it is to resolve the case through procedures established in the adopted Code Compliance Procedures Manual. The CDD Director shall find an applicant is eligible for consideration of a fee waiver by meeting the following criteria:
 - A. The applicant meets the criteria for indigency and at least one of the following conditions. Indigence shall be established through the completion of the Affidavit of Indigence and Request for Fee Waiver Form.
 1. There is an immediate need for the services of CDD to protect the applicant's or the public's health or safety.
 2. Granting the waiver will create a financial efficiency of a Code Enforcement issue.
2. The completed Affidavit of Indigence and Request for Fee Waiver Form will be delivered to the CDD Director for review and decision.
3. The applicant may appeal the CDD Director's decision to the Deschutes County Administrator. The applicant may appeal the Deschutes County Administrator's decision to the Board of County Commissioners.
4. Fee waivers under this policy to provide a public benefit provided by a non-profit or public organization are subject to Board of County Commissioners approval.
5. The Board of County Commissioners may issue blanket fee waivers, subject to the above criterion, for classes of hardship such as natural disasters.
6. The Board of County Commissioners may waive fees in any other case where the public benefit is served and other remedies have been exhausted.

INDIGENCY:

Property owners, non-profit or public organizations or other responsible persons who lack the financial ability to obtain permits and pay fees established by the County for Community Development services may receive relief. The procedure for establishing financial indigency is set forth below:

Procedure:

In cases where the applicant appears to have insufficient resources to pay fees, the applicant may complete the Affidavit of Indigence and Request for Fee Waiver Form to qualify for financial assistance by meeting the following criteria.

1. Qualify as Indigent
To qualify for assistance under this section, the applicant or other responsible person must demonstrate a substantial financial hardship that makes paying the required fees impractical.
2. Nonprofit or Public Organization
To qualify for assistance under this section, the applicant has encountered extraordinary hardship which could not have been anticipated in planning for and funding of the project; and the fee waiver will benefit the community.
3. Submit Request for Fee Waiver
An applicant may apply for a fee waiver of CDD development fees for permits. The decision to waive development fees will be made by the CDD Director, considering the factors included on the fee waiver form.



AFFIDAVIT OF INDIGENCE AND REQUEST FOR FEE WAIVER FORM

This information is submitted in confidence and is not subject to public disclosure (ORS 192.502(2))

I, the undersigned, am requesting a waiver of Deschutes County Fees for Community Development services because I cannot pay at this time without causing substantial hardship to myself and/or my dependent family.

I ask the CDD Director to use this information to decide whether I may receive a fee waiver at public expense. I understand I may be required to verify this information.

APPLICANT (including non-profit or public organizations):

Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

Explanation of Request: _____

****Staff Use Only****

Description of fees to be waived: _____

Est. Amount _____

Fee Waiver Approved: [] Yes [] No

Community Development Director _____

Date: _____

Comments: _____

EMPLOYMENT AND INCOME:

Current Employer: _____ Employment Date(s): _____

Occupation: _____ Phone Number: (____) _____

After Tax Monthly Income: _____

If unemployed, please provide dates: _____

Previous Employer: _____ Employment Date(s): _____

Spouse's Employer: _____ Employment Date(s): _____

Occupation: _____ After Tax Monthly Income: _____

If unemployed, please provide dates: _____

OTHER INCOME: Include income for you and spouse, dependents and other household members financially assisting with living expenses (examples: Social Security, unemployment, retirement, child support, workers compensation, etc.)

Source of Income	Amount	Received Since	Monthly Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MONTHLY EXPENSES:

List all household expenses paid monthly by you, spouse or household member.

Rent: _____ Utilities: _____ Credit Cards: _____

Vehicle: _____ Insurance: _____ Other: _____

I certify the above information is true and correct to the best of my knowledge and belief.

Applicant Signature

Date