



CITY OF VACAVILLE APPLICATION FOR ASSESSMENT APPORTIONMENT

Please complete the application in full. Refer to the attached instructions for assistance.

Return completed form to: CITY OF VACAVILLE
Community Development Department
650 Merchant Street
Vacaville, CA 95688

Owner/Engineer _____ Phone Number _____

Street Address _____ City _____ State _____ Zip Code _____

Assessment District Name _____

Project Description _____
Call the NBS Government Finance Group at (800) 676-7516 for District and/or Project Information

Original APN(s)	Legal Description	Original Assessment Amount(s)

Purpose (Please check one):	
<input type="checkbox"/>	Subdivision Map
<input type="checkbox"/>	Parcel Map
<input type="checkbox"/>	Lot Line Adjustment No.:
<input type="checkbox"/>	Parcel Map Waiver No.:

Fee Schedule
Tract Map Apportionment (5 or more parcels) per Chapter 2, Section 66426 of the Subdivision Map Act: \$2,155 per subdivision/tract map plus \$65 per parcel. 2226 66
Parcel Map Apportionment (4 or less parcels) per Chapter 2, Section 66426 of the Subdivision Map Act: A flat fee of \$1,303 1376

Number of new parcels: _____

The undersigned, being the owner or interested party in property as set forth below, hereby requests the City of Vacaville to apportion the amount remaining unpaid on the above assessment(s) in accordance with the provisions of Part 10.5 of the "Improvement Bond Act of 1915", and said assessment is to be apportioned to each separate part of the original lot or parcel of land, the apportionate part of the amount remaining unpaid on the assessment that would have been levied thereon had the lot or parcel been so divided at the time of the original confirmation of assessment.

Applicant's Signature _____ Date _____

IMPORTANT: A COPY OF THE FINAL MAP (18" x 26" BLUELINE & 8 1/2" x 11" REDUCTION) MUST BE PROVIDED TO BE USED AS THE BASIS FOR THE AMENDED ASSESSMENT DIAGRAM.