

**SPECIAL TAXING DISTRICT FORMATION
MAPS, PROPERTY DESCRIPTION, AND PROPERTY OWNER LIST
APPLICATION**

Proposed District Name: _____ Date of Application _____

SECTION A:

PROPOSED DISTRICT BOUNDARY INFORMATION:

1. IDENTIFY OR DESCRIBE THE EXTERIOR BOUNDARIES BY STREET NAME: _____

2. IDENTIFY ANY PROPERTIES TO BE EXCLUDED FROM PROPOSED DISTRICT BY PARCEL NUMBER: _____

3. REQUESTED DATE TO RECEIVE THE REQUESTED DOCUMENTS _____
(A minimum of 2 weeks is required to prepare map, property description, and list of property owners. Requests are processed in the order they are received.)

The maps, property description, and list of property owners which I have requested are being used for the following

purpose(s): _____

SECTION B:

1. There will be no charge for the first request of a 1) map, 2) property description, and 3) list of property owners to be used for the proposed formation of a special taxing district unless the request requires more than 8 hours to complete. (Map size is 8-1/2" x 11")
2. \$100.00 per hour for each hour over 8 hours if the production of a map, property description or list of property owners requires more than 8 hours (applicant will be notified before charges accrue).
3. \$100.00 per hour for **any** revisions to the boundaries, property description, property exclusions, or list of property owners after response to the first request, which will be charged and payment will be due before the release of the revised map, property description, and list of property owners
4. Maps:
 - For 11" x 17" Maps (includes 1 color and 1 black & white map) Additional \$3.00
 - 24" x 32: Maps (includes 1 color and 1 black & white map) Additional \$10.00

I certify that all information provided is true and correct. I agree not to hold Maricopa County liable for any inaccurate or incomplete information I may receive. I accept responsibility for unauthorized use or transmission of the data or information. (See disclaimer below).

**SPECIAL TAXING DISTRICT FORMATION
MAPS, PROPERTY DESCRIPTION, AND PROPERTY OWNER LIST
APPLICATION**

DISCLAIMER INDEMNIFICATION

By executing this document, the Requester understands and agrees that Maricopa County does not guarantee the accuracy of the data and information requested and hereby expressly disclaims any responsibility for the truth, lack of truth, validity, invalidity, accuracy, inaccuracy of any said data and information. Requester/Purchaser accepts responsibility for Requester/Purchaser's unauthorized use or transmission of any such data or information in its actual or altered form.

SECTION C:

CONTACT INFORMATION:

- 1. PROPOSED DISTRICT NAME _____
- 2. REPRESENTATIVE NAME _____ PHONE NO. _____
- 3. COMPANY NAME _____
- 4. ADDRESS _____
- 5. EMAIL ADDRESS _____
- 6. I, _____, am the designated contact for this proposed district formation application.
(Print or Type Name)

Requester's Signature

Date of Signature