## Petition for Application to the Maintenance Assessment District Formation Fund for

(Tentative name of district)

FOR CITY USE ONLY: PETITION APPROVED BY CITY MAD STAFF MEMBER					
(NOTE: PRINTED NAME AND SIGNATURE MUST APPEAR ON ALL PETITION PAGES)					
Printed Name:	Signature:	Date:			

## Petitioners to fill in areas of petition underlined

To the City of San Diego:

1. The undersigned is an owner(s) of land within an area identified as \_\_\_\_\_

2. I (we) support installation and maintenance services in the public right of way in our community to include \_\_\_\_\_

3. I (we) understand that a maintenance assessment district (MAD) will need to be formed to support these proposed improvements and that I will be given an opportunity to vote on whether or not this district should be formed. I further understand that while the final assessment rate will be determined by an independent certified assessment engineer hired by the City, estimated yearly assessments per single family household parcel are estimated to be \_\_\_\_\_\_\_. I further understand that while assessment figures will vary depending on the nature of the improvement, typically assessments for condominiums are a bit less than the single family parcel rate, while fees for commercial, governmental entities and multi-family residences will be higher. 4. I (we) petition to begin proceedings for the formation of a Maintenance Assessment District under the Maintenance Assessment District Ordinance, including a formal vote of all property owners. I understand that any MAD Formation Fund monies advanced by the City as a result of this petition (estimated at between \$30,000 and \$50,000) must be repaid in full through assessments collected from property owners within the district during the first year following successful district formation or until such time as all funds are repaid.

5. The Maintenance Assessment District is to be known and designated as \_

6. I (we), the undersigned, hereby certify under penalty of perjury that I (we) are the owners of record of the property identified below.

Date	Street No/Street Address	Parcel Number	Signature	Printed Name

## **Return to:**

Contact Phone No.:\_\_\_\_