

City of Tigard, Oregon  
Franchise Utility Linear Foot ROW Use Fee

Reporting Period: \_\_\_\_\_

I certify this utility operator **DOES NOT** provide service to customers within the Tigard city limits.

Line A FEIN: \_\_\_\_\_ OR Tax ID Number: \_\_\_\_\_

Line B Utility Company Name Doing Business In Oregon: \_\_\_\_\_

Line C Mailing Address: \_\_\_\_\_

Line D Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Line E Payment Date Due: \_\_\_\_\_

Line F Total Linear Footage of facilities owned in Tigard's public streets and rights-of-way (total of lines G, H & I) \_\_\_\_\_

**Sources of Linear Foot Figure**

Line G Electronic as-built drawings (feet) \_\_\_\_\_

Line H Paper as-built drawings (feet) \_\_\_\_\_

Line I Other: (specify) \_\_\_\_\_

Line J Per Linear Foot Rate (per city fees and charges resolution) OR \$2.90

Line K \$4,000 annual fee (whichever is greater)

Line L Total Remittance of per linear foot fee (multiply Line F by Line J or pay Line K (\$4,000) whichever is greater) \$ \_\_\_\_\_

~ I hereby certify that the above Linear Foot Fee or Annual Fee is being remitted rather than a Franchise-Utility ROW fee because said utility company **does not** provide service to customers within the city limits of Tigard per Tigard Municipal Code Chapter 15.06 requirements.

~ I hereby certify that all statements made in this report and any attachments are true, complete and accurate to the best of my knowledge and belief as an officer, or other authorized representative of utility operator with fiduciary responsibility, of said utility company.

\_\_\_\_\_  
Utility Company - Officer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
PRINT name, officer's title, phone number and email address

Subscribed and sworn to before me on this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_

My Commission expires on: \_\_\_\_\_

**REMIT TO:**

City of Tigard - Finance Dept.  
13125 SW Hall Blvd.  
Tigard, OR 97223