

Printed Name

Transportation System Development Charge



Form TSDC-4

ELECTION BY INSTITUTIONAL DEVELOPMENT OF SPECIAL TRIP GENERATION RATE AND TSDC CALCULATION

APPLICANT & PROJECT IDENTIFICATION	
Applicant Name:	
Development Address (parcel # or tax lot #):	
Building Permit #:	
TYPE OF "INSTITUTIONAL DEVELOPMENT"	
Check one:	
☐ Medical Institution	
■ Educational Institution (High School, College, University and similar institutions)	
SIZE OF SITE	
Your site must be five acres or larger in size to qualify as an "Institution	nal Development".
Specify total acreage of site:	
SIGNATURE AND DATE	
Pursuant to Section (17.15.040(b) of the SDC Ordinance, we hereby basis of annual changes in the total number of trips generated by requirements of Section 17.15.040(b) of the SDC Ordinance that per SDC Calculation.	y the entire site. We understand and accept the
Name of Institution	Date
Signature (Officer or Director)	Date