



COUNTY OF RIVERSIDE JOINT COMMUNITY FACILITIES AGREEMENTS APPLICATION/PROPOSAL REQUIREMENTS

Name of the En	tity forming the CFD:
Contact name:	
	Fax number:
Name/Number	of the CFD:
-	
List of the Finai	ncing Team Members:
Total cost of CF	FD facilities and the cost of the proposed County facilities: \$
Written stateme	ent from the Entity that sufficient bonding capacity exists for all proposed facilities.
Diagram/map o	of the CFD (attach).
Annroyad Tract	Maner





14.	A check for \$4,000, which can be recouped from the cost of issuance. Please schedule an appointment to review your application submittal.	
	Draft JCFA must be in the Standard County Format and any changes must be marked to show the changes. If this does not occur, the County will decline involvement in the JCFA.	
12.	Financing policy detail (no escalating debt, 4:1 value to lien, 10% cross-collateralization):	
11.	Detailed description of the County facilities (linear feet, station markings, cost, etc.): NOTE: No streetlights, landscaping or median parkways will be included.	
10.	Total amount of acreage involved, estimated number of dwelling units:	
9.	Identification of Improvements Areas, Tract numbers, coterminous boundaries:	
ο.	NOTE: All Street Improvement Plans, Sewer & Water Plan and Profiles, Flood Control and Drainage Plans must be in at least 1st Plan Check.	