

**TDT CREDIT VOUCHER REASSIGNMENT AND/OR TRANSFER FORM**

Date: \_\_\_\_\_

WASHINGTON COUNTY, OREGON  
Department of Land Use and Transportation  
c/o Development Services Accounting  
155 N First Avenue, Suite 350 - MS12  
Hillsboro, OR 97124  
(503) 846-3470

**Voucher to be reassigned/transferred FROM:**

Request credit voucher #: \_\_\_\_\_ (one voucher per form)  
Amount of credit voucher to transfer is: \$ \_\_\_\_\_  
Credit voucher currently owned by: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Property at: \_\_\_\_\_  
(Plat, Parcel number(s) or Subdivision & Lot #s)

**COMPLETE SECTION I. (OWNERSHIP Reassignment) or SECTION II. (LOCATION Transfer) OR BOTH SECTIONS (if changing BOTH Owner and Location)**

**SECTION I: REASSIGNMENT OF TDT CREDIT VOUCHER TO NEW OWNER**

**Voucher to be Reassigned TO:**

Name: \_\_\_\_\_ (authorized representative)  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_

Signature of owner of **ORIGINAL credit voucher** (or authorized company representative),

Signature \_\_\_\_\_  
Printed name of signer \_\_\_\_\_  
Title of signer \_\_\_\_\_  
Phone # \_\_\_\_\_  
Email address \_\_\_\_\_

**SECTION II: TRANSFER OF TDT CREDIT VOUCHER TO DIFFERENT PROPERTY/SUBDIVISION**

**Voucher to be Transferred TO:**

Property at: \_\_\_\_\_

(Plat, Parcel number(s) or Subdivision & Lot #(s))

If the credit voucher is being transferred to a different property/subdivision than the one to which it is currently assigned, describe how such a reassignment is allowable per the [TDT code](#) (Ordinance 691-A Section 3.17.080) or [North Bethany TSDC code](#) (Resolution & Order 2010-098 Section 080) or [Bonny Slope West TSDC code](#) (Resolution & Order 2016-08) **AND** attach a map showing locations credits are being transferred **FROM** and **TO**.

---

---

---

---

---

---

---

---

---

---

Information described above will be subject to review and approval by LUT Long Range Planning:

Approved by \_\_\_\_\_

Date \_\_\_\_\_

Signature of owner of **ORIGINAL credit voucher** (or authorized company representative),

Signature \_\_\_\_\_

Printed name of signer \_\_\_\_\_

Title of signer \_\_\_\_\_

Phone number \_\_\_\_\_

Email \_\_\_\_\_