

Wakulla County
County Administrator
P.O. Box 1263
Crawfordville, FL 32326

**Non-Binding Ballot to Assist the County Commission in a Decision
Regarding the Proposed Voluntary Assessment Program**

«OwnerName1»
«OwnerName2»
«OwnerAdd1»
«City» «State» «Zip»

Date:

Sequence #
Tax Parcel # «PID»

Wakulla County (County) has prepared this non-binding ballot to determine the support of property owners for the development and implementation of a special assessment program to fund the proposed improvements within the _____ subdivision. This ballot has been sent to every property owner that may be affected by the proposed improvements. In October _____, property owners within the subdivision submitted a petition signed by at least 51% of the property owners who will be affected by the improvements indicating their support for the proposed assessment program.

Because of the favorable petition, the County initiated the process for developing this assessment program and determined the estimated project costs for the proposed improvements of approximately \$_____.

These funds will be reimbursed through the proposed assessment program, if approved. If the construction costs are financed, the proposed special assessment program will re-pay the borrowed amount and all associated interest on the loan. Estimated project costs including the costs to borrow the money are approximately \$_____. The proposed assessment program will allocate these estimated project costs to all affected property owners based on the _____ [example: number of lots on each parcel].

Property owners will have the option of paying the entire assessment in full or paying the assessment over a period of years (along with financing costs, including interest). To pay the assessment in full, the assessment amount would be \$_____ for each lot.

The assessment will be paid over a period of _____ years, and the special assessment will be collected on the same bill as your property taxes starting in November 20__ and each year thereafter until costs are repaid. The annual assessment amount per lot would be a maximum of \$_____ for each _____.

If the non-binding ballot results are favorable, meaning at least 66 percent (66%) of the responding property owners indicate their support for the project, the County Commission will take the steps necessary to implement this project. The steps include another mailed notice to you with the exact amount to be assessed for your property. The mailed notice will also provide the time and place of a public hearing to allow comments and make a final decision on the project. These steps would be completed by September 15, 20__ and construction could begin on the proposed project soon after that date.

If you have any questions, contact Benjamin Pingree, County Administrator, at (850) 926-0919. Thank you for your cooperation in this effort.

-- Please complete the attached ballot and return it in the envelope provided by _____, 20__. --

«OwnerName1»
«OwnerName2»
«OwnerAdd1»
«City» «State» «Zip»

PLEASE COMPLETE AND RETURN THIS NON-BINDING BALLOT

Wakulla County
County Administrator
P.O. Box 1263
Crawfordville, FL 32326

Sequence #
Tax Parcel # «PID»

[QUESTION] Should the Wakulla County Board of County Commissioners create a special assessment program and assess each of the property owners in the _____ subdivision an annual non ad-valorem special assessment for the proposed _____ improvements? The special assessment program will fund the cost of these improvements within the project area. Please mark your choice below, sign where indicated, and return this ballot in the enclosed envelope.

****This ballot must be postmarked on or before _____, 2010, to be valid and included in the survey results.**

(Please mark one response)	Yes	No
Create special assessment program and impose special assessment in an amount not to exceed \$_____ for improvements expected to cost \$_____?		

I, _____ of _____
(Print name) (Print mailing address)

affirm that I am the owner of record of the indicated parcel or have been duly authorized by the owner(s) of record of the indicated parcel to cast this ballot. I understand that this ballot represents an attempt to solicit extraordinary landowner input and is not binding upon the Wakulla County Board of County Commissioners.

Date: _____, 2010 By: _____
(Signature)

This Ballot must be returned to the Wakulla County Administrator's Office by _____, 2010 by mail to P.O. Box 1263, Crawfordville, Florida, 32326 or fax to (850) 926-0940. A self-addressed, stamped envelope has been included for your convenience.

If you have any questions, contact Benjamin Pingree, County Administrator at (850) 926-0919. Thank you for your cooperation in this effort.

PLEASE COMPLETE AND RETURN THIS SURVEY

Parcel Number: «PID»

Sequence Number: