

Date: September 9, 2019

RESOLUTION NO. 19-02

**A RESOLUTION OF ELLISPORT BAY SEWER DISTRICT, OF BONNER COUNTY, IDAHO,
ESTABLISHING A POLICY TO ADDRESS REPURCHASE OF UNUSED CAPACITY NOT CREATED
THROUGH A LOCAL IMPROVEMENT DISTRICT (HOOKUPS)**

**ELLISPORT BAY SEWER DISTRICT
Bonner County, Idaho**

WHEREAS, Ellisport Bay Sewer District, of Bonner County, Idaho, (the "District") is a political subdivision of the State of Idaho operating and existing as a special purpose district pursuant to the laws of the State of Idaho; and

WHEREAS, the governing board of the District modify its established a policy regarding the repurchase of committed capacity (hook-ups which were not subject to the original local improvement district assessment roll) previously sold at a charge of \$13,205.00; and

WHEREAS, the District's decision to repurchase committed unused capacity shall consider, but not be limited to the following: the District's need for capacity to be available for sale and the District's financial capability to repurchase the capacity; and the desire of other members in the District to acquire the right to utilize the capacity;

WHEREAS, the District had established an administrative fee of \$500.00 for such repurchases on July 13, 2004

NOW, THEREFORE, BE IT RESOLVED as follows:

1. The District hereby approves a \$300.00 administrative fee for repurchase of committed capacity new hook-ups.
2. Any property owner desiring the District consider repurchasing their committed capacity (hook-up) shall submit a request in writing to the District on District Format.
3. The Board will determine if the District should repurchase the committed capacity. The decision of the Board is at the Board's sole discretion, and the District is not required to repurchase committed capacity.
4. If the Board determines that it is not in the District's best interest of the District to repurchase the committed capacity at that time, the property owner's name shall be placed on a waiting list in the order that the request was received, i.e. the oldest request shall be first on the list. Should the Board determine in the future that the District should repurchase capacity, the District will notify the owners on the list of the District's desire to purchase and provide a response date. From those property owners on the list who timely respond, the excess capacity shall be purchased from the first person on the list.
5. This Resolution replaces Resolution No. 04-2 in its entirety.

**THIS RESOLUTION IS DULY PASSED AT A (PLEASE CHECK ONE / /REGULAR/ /SPECIAL)
MEETING OF THE ELLISPORT BAY SEWER DISTRICT BOARD OF DIRECTORS HELD ON THE
DATE SET FORTH ABOVE.**

Passed and adopted by the BOARD of the SEWER DISTRICT the 9th day of September 2019, by the following votes.

Ayes 3 Nays 0

ATTESTED BY:


Secretary


Chair

**ELLISPORT BAY SEWER DISTRICT
PROPERTY/HOMEOWNER REQUESTS TO SELL BACK
EQUIVELENT RESIDENTAIL UNIT/S (ERU/S)**

PROPERTY/HOMEOWNER NAME/S: _____

PROPERTY/HOMEOWNER NAME/S: _____

PARCEL NUMBER (RP): _____

PROPERTY LEGAL DESCRIPTION: _____

PROPERTY PHYSICAL ADDRESS: _____

PROPERTY OWNER/S MAILING ADDRESS: _____
(Street Address or PO Box)

(City)

(State)

(Zip)

Main Contact Phone: _____ Main Contact Email Address: _____

THE ABOVE PROPERTY/HOMEOWNER/S request to sell back _____ (number of ERU/S) to Ellisport Bay Sewer District. **As the PROPERTY/HOMEOWNER/S, I/We have read the attached Resolution No. 19-01 OR Resolution No. 19-02, whichever Resolution is applicable.**

(Property/Homeowner/s Signature)

(Date)

(Property/Homeowner/s Signature)

(Date)

CITY APPROVAL REQUIRED BELOW

I _____ of _____ certify that the
(Name of Clerk) (Name of City)
sell back of said hook up connection is compliant with City Planning and Zoning Ordinances.

(Clerk's Signature)

(Date)

If you have any questions regarding the sell back ERU purchase process, please call EBSD Clerk at 208.264.0112, or email at clerk@ebsewerdistrict.com.

**ELLISPORT BAY SEWER DISTRICT
PROPERTY/HOMEOWNER REQUESTS TO PURCHASE
EQUIVELENT RESIDENTAIL UNIT/S (ERU/S)**

PROPERTY/HOMEOWNER NAME/S: _____

PROPERTY/HOMEOWNER NAME/S: _____

PARCEL NUMBER (RP): _____

PROPERTY LEGAL DESCRIPTION: _____

PROPERTY PHYSICAL ADDRESS: _____

PROPERTY OWNER/S MAILING ADDRESS: _____

(Street Address or PO Box)

(City)

(State)

(Zip)

Main Contact Phone: _____ Main Contact Email Address: _____

THE ABOVE PROPERTY/HOMEOWNER/S request to purchase _____ (number of ERU/S) for sewer services by the Ellisport Bay Sewer District.

The current cost to purchase an ER is \$ _____, plus a \$100.00 administrative fee.

(Property/Homeowner/s Signature)

(Date)

(Property/Homeowner/s Signature)

(Date)

CITY APPROVAL REQUIRED BELOW

I _____ of _____ certify that the
(Name of Clerk) (Name of City)
purchase of said hook up connection is compliant with City Planning and Zoning Ordinances.

(Clerk's Signature)

(Date)

If you have any questions regarding the sell back ERU purchase process, please call EBSD Clerk at 208.264.0112, or email at clerk@ebsewerdistrict.com.