



Petition for Reduction of Arterial Construction Fee Assessments 2022

Overview

Arterial construction fees are a citywide assessment that fund the construction and reconstruction of the arterial road system. The fees are assessed on the annual property tax statement based on a property’s zoning classification and square footage as established under Billings, Montana City Code (BMCC) Article 22-1000.

Petition Guidelines

Owner-occupied, single-family residences in commercial, mixed residential, or residential manufactured home zone classifications may petition for a reduction in the arterial construction fee. The reduction granted to qualifying property owners will cap the parcel square footage at a maximum of 9,600 square feet, the same as residentially zoned parcels, and will calculate the fee based on the lower suburban neighborhood residential zone classification rate. Additional information and digital forms are available at [billingsmtpublicworks.gov/194/ Street-Traffic-Repairs-Maintenance](http://billingsmtpublicworks.gov/194/Street-Traffic-Repairs-Maintenance) under the Assessment & Districts tab.

Petitions must be submitted annually by August 31.

Parcel Tax ID: _____ Parcel Address: _____

Property Owner Name(s): _____

Phone Number: _____ Email: _____

Mailing Address: _____

Certification of Eligibility to File Petition

I certify that I own the parcel identified above, that it is my primary residence, that I use the parcel solely as a single-family residence, and that all information provided on this form is true and correct. I understand that if the information supplied on this form is found to be false, I agree to pay back to the City of Billings the amount of the reduction to the Arterial Construction Fees on this parcel as a result of the false information PLUS penalty and interest. I further understand that I must annually apply for a reduction to the arterial construction fee assessment by August 31 of each year. I agree to notify the Billings Public Works Department immediately should any information provided on this form change.

I Agree

Applicant Signature: _____ Date: _____

Please, note that fields in red must be completed by the applicant. Incomplete or unsigned forms will not be accepted.

Return to 2251 Belknap Avenue, Billings, MT. 59101

For Internal Use Only

Parcel Zoning: _____ Parcel Square Footage: _____

Application Status: Accepted Denied

Notes:

Reviewer Signature: _____ Date: _____