



DO NOT SUBMIT THIS APPLICATION WITHOUT ARIFC APPROVAL

ALTERNATIVE ROAD IMPACT FEE APPLICATION*

Concurrency Management Office · Growth Management Department
PO Box 1393 Orlando, FL 32802-1393 · 407-836-5617

TYPE OF REQUEST (Please Check One):

ARIF APPLICATION # _____

- NEW STUDY** (Processing Fee \$2,655)
- TRANSFER EXISTING STUDY** (Processing Fee \$1,525)
(These fees are non-refundable)

Case # of Approved Study Requested _____

Please include the following:

- Parcel Identification number** (ONLY INCLUDE THE PROPERTY FOR WHICH YOU ARE REQUESTING A STUDY)
- Complete Legal Description** (Legal description must not include property not covered by the proposed alternative impact fee agreement)
- Map from Property Appraiser’s website** (www.ocpaf.org) **for each parcel ID included on this application**
- Zoning approval for the Land Use proposed in your study**
- Land Use consistent with the one proposed on your study**

PROJECT INFORMATION:

APPLICANT NAME _____ PHONE # _____

PROJECT NAME _____ PERMIT # (If Available) _____

LOCATION _____

SIZE (UNITS/ROOMS/SQ. FT.) _____ LAND USE CATEGORY _____

STUDY CONSULTANT _____ PHONE # _____

PARCEL ID NUMBER _____

OWNER INFORMATION:

OWNER NAME/COMPANY NAME _____

ADDRESS _____

CONTACT PERSON _____ PHONE # _____

APPLICANT’S SIGNATURE: _____

PRINTED NAME: _____

DATE: _____

