



COMMERCIAL DEFERRED IMPACT FEE APPLICATION

Building Permit Number _____

I, _____, contractor/agent/owner (if other than owner an agent authorization form must be attached to this application) of the below identified property, do hereby request that the Orange County Community, Environmental and Development Services Department allow deferral of applicable impact fees. I believe that my project qualifies for deferral under Orange County Code because (check all that apply):

The project valuation is over one million dollars (\$1,000,000.00), as acknowledged on the building permit application(s). Applicable fees are due and payable to the Orange County Board of County Commissioners. A lien notice of non-payment will be placed on the property until all fees have been paid in full.

The project is a certified affordable housing project and an executed agreement setting forth the terms and conditions for deferral of impact fees is attached to this application.

PROPERTY APPRAISER'S PARCEL IDENTIFICATION NUMBER(S)

Tax I.D. Number: Section _____ Township _____ Range _____ Sub _____ B&L _____

(Street Address)

Name of Owner or Authorized Agent (please print)

Telephone Number

Owner or Authorized Agent Address

City, State, Zip Code

Mailing address (if different from above)

Note: School impact fees cannot be deferred.

Any deferral of impact fees shall be until prior to authorization of pre-power or issuance of a certificate of occupancy (whichever occurs first). Deferred impact fees must be paid for the entire project when the first certificate of occupancy is issued. My signature acknowledges that I understand and agree that a recorded lien notice for non-payment of impact fees will be placed on the property described above until all fees have been paid in full.

The above statements on page 1 are true and correct to the best of my knowledge.

Owner or Authorized Agent Signature

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20__ by _____, as an individual/officer/agent, on behalf of himself/herself or on behalf of _____, a _____ corporation/ partnership/ limited liability company. He/she is personally known to me or has produced _____ as identification and did/did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this ____ day of _____, 20__.

Notary Public
My commission expires: _____

DO NOT WRITE BELOW THIS LINE (TO BE COMPLETED BY ORANGE COUNTY STAFF)

IMPACT FEE INFORMATION:

Law Enforcement Impact Fee: \$ _____

Fire & Rescue Impact Fee: \$ _____

Transportation Impact Fee: \$ _____

Transportation Impact Fee Zone #: 1 2 3 4

Parks & Recreation Impact Fee: \$ _____

BCC Approval date for Affordable Housing project when applicable: _____

IMPACT FEE SECTION STAFF APPROVAL:

Name: _____

Date: _____

Lien placed? Yes No

Document # _____

Recording Date: _____

SATISFACTION INFORMATION:

Date fees when paid: _____

AMOUNTS: Transportation \$ _____ Fire \$ _____ Law \$ _____

TOTAL FEES PAID \$ _____

Document # _____

Recording Date: _____



AGENT AUTHORIZATION FORM
FOR DEFERRAL OF IMPACT FEES APPLICATION

Building Permit Number _____

I, _____, as the property owner of the property described below, hereby give my permission for _____ to act as my agent for the limited purpose of applying for deferral of impact fees at the time of permitting in accordance with the Orange County, Florida Code of Ordinances.

Parcel Identification Number: Section __ Township __ Range __ Sub ____ B&L ____

Legal Description:

Signature of Property Owner

Date

Print Name of Property Owner

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20__ by _____, as an individual/officer/agent, on behalf of himself /herself or on behalf of _____, a _____ corporation/ partnership/ limited liability company. He/she is personally known to me or has produced _____ as identification and did/did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this ____ day of _____, 20__.

Notary Public
My commission expires: _____