

INDIAN RIVER COUNTY
APPLICATION FOR IMPACT FEES (IF) INDIVIDUAL ASSESSMENT
 (Section 1000.08(3) and Section 1010.03(2) of Title X of the County Code)

 * ASSIGNED I.R.C. *
 * PROJECT NUMBER: _____ - _____ *

Complete as indicated and submit to the Indian River County Planning Division.

TYPE or PRINT ALL information unless otherwise requested:

I. A. Owner/Applicant Information

 Name

 Business

 Address

 City State Zip
 (____) _____
 Phone Ext.

B. Agent/Applicant Information:

 Name

 Business

 Address

 City State Zip
 (____) _____
 Phone Ext.

II. Identify the Impact Fee Categories that Individual Assessments are Requested for

- Traffic (Section 1010.03(3) of Title X of the County Code)
- Correctional Facilities (Section 1000.08(3) of Title X of the County Code)
- Solid Waste (Section 1000.08(3) of Title X of the County Code)
- Public Buildings (Section 1000.08(3) of Title X of the County Code)
- Fire/EMS (Section 1000.08(3) of Title X of the County Code)
- Law Enforcement (Section 1000.08(3) of Title X of the County Code)
- Library (Section 1000.08(3) of Title X of the County Code)
- Park and Recreation (Section 1000.08(3) of Title X of the County Code)
- School (Section 1000.08(3) of Title X of the County Code)

III. Subject Property Information

Project Name: _____

Project Address: _____

Property Tax I.D. Parcel #: _____

IV. Please provide the following items with this application:

1. A written notice of request for individual assessment
2. Supporting document for individual assessment
3. Application Fee of \$2,000.00 or 5% of the assessed impact fee based on the impact fee schedule, whichever is less, for each impact fee category assessment.

V. Application Certification:

I hereby certify that I have the authority to make the foregoing application, and that the application is true, correct and complete to the best of my knowledge.

NOTICE - BE AWARE THAT:

Florida Statute Section 837.06 - False Official Statements Law states that:

"Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree," punishable as provided by a fine to a maximum of \$500.00 and/or maximum of a sixty day jail term.

Name: _____ /_____/_____
(print) Date

Applicant/Agent/Owner Signature: _____