RESIDENTIAL 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 Planning, Environmental and Development Services Department allow deferral of applicable impact fees. I understand and agree that any deferral of impact fees shall be until **authorization of pre-power or issuance of a certificate of occupancy (whichever occurs first).** My signature acknowledges that I understand and agree that pre-power will not be authorized and/or that a certificate of occupancy will not be issued until all fees have been paid. 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

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

Owner or Authorized Agent Signature

Date

Notary Signature

My Commission Expires:

DO NOT WRITE BELOW THIS LINE (TO BE COMPLETEI	D BY ORANGE COUNTY STAFF)
IMPACT FEE INFORMATION:	Law Enforcement Impact Fee: \$
	Fire & Rescue Impact Fee: \$
	Transportation Impact Fee: \$
	School Impact Fee: \$
IMPACT FEE SECTION STAFF APPROVAL:	Parks & Recreation Impact Fee: \$
Signature:	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 deferral of impact fees at the tin Ordinances.	, as the property owner of the property described below, hereby give my to act as my agent for the limited purpose of applying for me of permitting in accordance with the Orange County, Florida Code of
Parcel Identification Number: Sec	ction Township Range Sub B&L
Legal Description:	
Signature of Property Owner	Date
Print Name of Property Owner	
STATE OF COUNTY OF	·
presence or \Box online notarization	knowledged before me, a Notary Public, by means of \Box physical this day of, 20, by, as
on behalf of said identification)	, a, , a, , who □ is personally known to me or □ has produced (type of as identification.
	Notary Public
(Notary Seal)	Printed Name
	My Commission Expires: