



IMPACT FEE PAYMENT PLAN REQUEST FORM

The City of Orlando collects transportation, sewer, and parks fees on new Commercial and Multi-family development projects to pay for necessary public infrastructure. Customers who are charged impact fees can apply for an Impact Fee Payment Plan through the City of Orlando Permitting Services office. This payment plan requires two (2) payments; 50% of the impact fee due at permit issuance and 50% due prior to final inspection.

Complete this form to request a payment plan:

Permit Case Number: _____

Project Address: _____

Property Owner Name: _____

Property Owner Email: _____

Property Owner Phone Number: _____

Applicant Name: _____

Applicant Email: _____

Applicant Phone Number: _____

Request to enter into a payment plan for (choose all that apply):

_____ Parks Impact Fee

_____ Sewer Impact Fee

_____ Transportation Impact Fee

_____ School Impact Fee (Single Family & Duplex Units ONLY)

Please allow 48-business hours to process the request. If you have questions on Impact Fees, email: impactfees@cityoforlando.net or call 407.246.3529

Certification Statement:

By my signature below, I certify the information contained in this application is true and correct to the best of my knowledge at the time of the application. I understand and comply with all the submittal requirements of this application. I further understand that this payment plan requires two (2) payments; 50% of the impact fees due at permit issuance and 50% due prior to Certificate of Occupancy or Certificate of Use (As per City Code Section 56.05). Any outstanding impact fee balances shall be paid prior to Certificate of Occupancy or Certificate of Use. If the subject Commercial or Industrial Permit(s) becomes inactive after a period of six (6) months or longer (As per City Code Section 13.06), the initial impact fee shall be reassessed at the current rate in effect at the time of Certificate of Occupancy or Certificate of Use, which may result in an increase to the overall impact fee(s).

Property Owner's Signature: _____

Print (Owner) Name: _____

STATE OF FLORIDA, COUNTY OF _____

SWORN to and subscribed freely and voluntarily for the purpose therein expressed before me by _____,
Known to me to be the person described in and who executed the foregoing. He/She is personally known to me or
has produced _____ (type of identification) as identification.

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

Notary Public Signature

Print Name: _____ My Commission Expires: _____