

**GROWTH AND RESOURCE MANAGEMENT**

123 West Indiana Avenue, Room 200

DeLand, Florida 32720

Phone: (386) 736-5924 Email: [ImpactFees@volusia.org](mailto:ImpactFees@volusia.org)**VOLUSIA COUNTY IMPACT FEE APPLICATION***You must submit a city building permit application prior to this review.*

City permit application date: \_\_\_\_\_ City Permit Number: \_\_\_\_\_

Situs Address: \_\_\_\_\_

Tax parcel ID number: \_\_\_\_\_

*The tax parcel number should be a 12-digit number assigned by the County Property Appraisers office. If you are unsure of the correct tax parcel number, please contact the Property Appraisers office at (386) 736-5901.*

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**RESIDENTIAL**

Intended Residential Use:

☐ Single-Family ☐ Duplex ☐ Accessory Dwelling Unit ☐ Townhome/Condo ☐ Mobile Home ☐ Apartment**New:** Number of dwelling Units: \_\_\_\_\_ Sq Ft: \_\_\_\_\_ Number of stories: \_\_\_\_\_**Replacement:** Sq Ft of previous dwelling: \_\_\_\_\_ Sq Ft New: \_\_\_\_\_**Addition:** Sq Ft of existing dwelling: \_\_\_\_\_ Sq Ft of Addition: \_\_\_\_\_**COMMERCIAL**

Project Name: \_\_\_\_\_

List the intended Commercial Use and size of new building: (Example: Restaurant, medical, general office.) *Note: Quick lube and tire stores are calculated on the number of bays, and Hotel/Motel are on number rooms. Gas stations are on number of POS (point of Sale). Enter these numbers in place of Sq Ft.*

Use # 1 \_\_\_\_\_ Sq Ft \_\_\_\_\_ Use # 2 \_\_\_\_\_ Sq Ft \_\_\_\_\_

Is this project ☐ an expansion of an existing business, ☐ a change of use of an existing structure, or ☐ a demolition of structure(s)?

Please list the use and size of previous building. (Example: SFR, Restaurant, medical office, general office etc.). Documentation may need to be furnished to determine exemption amount.

Use # 1 \_\_\_\_\_ Sq Ft \_\_\_\_\_ Use # 2 \_\_\_\_\_ Sq Ft \_\_\_\_\_

**Addition:** Sq Ft of existing building: \_\_\_\_\_ Sq Ft New: \_\_\_\_\_**Signature of Applicant:** \_\_\_\_\_**NOTE:** For Commercial reviews, please submit a copy of the floor plans and a site plan with the application. For Multi Family Residential, we require a floor plan as well as a site plan with building & unit count w/ Sq Ft.**CITY OFFICE USE ONLY**

City Staff (print): \_\_\_\_\_ Date: \_\_\_\_\_

City Signature: \_\_\_\_\_

Notes: