

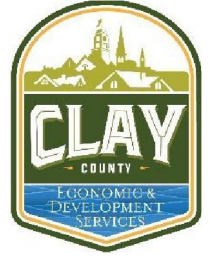


Economic and Development Services Zoning Division

477 Houston Street, Green Cove Springs, FL

32043 Phone: (904) 278-4705

www.claycountygov.com



**CHECKLIST FOR POSSIBLE IMPACT FEE EXEMPTION FOR
RESIDENTIAL DWELLING UNITS**

The owner of a parcel of land may be exempt from paying an impact fee if there is an existing dwelling unit on the property that has been listed on the tax roll. That dwelling must be removed and replaced with another dwelling unit. To be exempt from the school impact fee, the residence must have been on the tax roll at some point since 2003. To be exempt from the mobility and comprehensive impact fees, the dwelling must have been listed on the tax roll within the past five years.

Approval from the Zoning Department must be obtained prior to replacing a dwelling unit.

If you feel you may be entitled to an exemption for impact fees, please provide the required information to Maria Haney in the Economic and Development Services Department. You may submit your information by email to maria.haney@claycountygov.com, by fax at (904) 278-3706, or by submitting your information to the Building or Zoning Department.

The determination letter can either be picked up at the Zoning desk or mailed or emailed to:

IMPACT FEE EXEMPTION REQUEST

Property Address: _____

Parcel ID number: _____

Owner's name: _____

I am requesting an exemption for the impact fees on the property above. I have provided the following information required to make a determination for exemption:

1. Proof of property ownership or a letter of authorization from the owner of the record.
2. The property's complete parcel number (tax ID number).
3. The property address.
4. A site plan of the property (if available).
5. A copy of the building permit application is to be submitted for the replacement dwelling (if available).

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If all the information is not submitted with your request for exemption, a determination will not be made until you provide the information required.

The owner or authorized representative: _____

Date: _____

Phone Number: _____

Email Address: _____