



Application for Existing Use Credit

(Submit ONLY after the permit is ready to be issued, but before impact fees are paid)

Impact Fee Office

2300 N. Jog Road
West Palm Beach, FL 33411
(561) 233-5025

Permit #: _____

Date Submitted: _____

Applicant Information	
Name: _____ Phone: (____) _____ - _____ Email Address: _____	Name of Development [if applicable]: _____
Municipal Contact [if applicable]: _____ Email Address: _____	Plan Review #: _____ Phone #: _____
Property Information	
Property Site/Location Address: _____ City: _____ State: <u>Florida</u> Zip: _____ Parcel Control Number (PCN #): _____	Property Owner's Name: _____ Home Address: _____ City: _____ State: <u>Florida</u> Zip: _____ Email Address: _____
<input type="checkbox"/> Residential: _____ <input type="checkbox"/> Non-residential: _____	Number of existing units (Residential): _____
Previous Land Use: _____	Proposed New Land Use: _____
Previous Sq. Ft.: _____	Proposed Sq. Ft.: _____
Previous (Under Air) Living Space Sq. ft.: _____	
Demolition Information	
What year was the structure last in use? _____	
Has the building or structure been demolished: <input type="checkbox"/> Yes <input type="checkbox"/> No	If NO , proposed demolition date: _____ If YES , Demolition Permit No. _____

All applications for existing use credit must be presented to the Impact Fee Office at the time the permit is ready to be issued. All applications must be accompanied with supporting documentation for existing use credit (i.e.: signed & sealed survey, signed & sealed construction plans/drawings, or property record card/building details).

If the documentation is not provided, the application for existing use credit will be automatically canceled. It must be submitted prior to payment of impact fees. Any claim to a credit not made prior to the issuance of the building permit shall be waived.

I certify that all information given in this application is true to the best of my knowledge. Any false information given will result in immediate cancellation of application for existing use credit.

Print Name: _____ Date: _____

Signature: _____ Date: _____

Office Use Only

Reviewed By: _____ Date: _____ IFX #: _____

Approved By: _____ Date: _____

Comments: _____