

IMPACT FEES APPLICATION

City of Bradenton
101 12th Street West
Bradenton, FL 34205
941-932-9423

PERMIT # _____

DATE: _____

OWNER: _____ CONTRACTOR: _____

ADDRESS OF JOB: _____

UNIT VALUE	FIXTURE TYPE	APPLICATION		FIELD VERIFICATION	
		# Fixtures	Total	# Fixtures	Total
6	1 Bathroom Group (tank operated w.c. lav tub or shower)	_____	_____	_____	_____
3	Water closet, flushometer tank, public or private	_____	_____	_____	_____
4	Water closet, private installation	_____	_____	_____	_____
6	Water closet, public installation	_____	_____	_____	_____
2	Bidet	_____	_____	_____	_____
3	Combination sink and tray	_____	_____	_____	_____
4	Combination sink & tray with food disposal unit	_____	_____	_____	_____
1	Dental unit or cuspidor	_____	_____	_____	_____
1	Dental Lavatory	_____	_____	_____	_____
1/2	Drinking Fountain	_____	_____	_____	_____
2	Dishwashing machine domestic	_____	_____	_____	_____
1	Floor Drains (multiply by sewer charge only)	_____	_____	_____	_____
2	Kitchen Sink domestic	_____	_____	_____	_____
3	Kitchen Sink, domestic with food waste grinder	_____	_____	_____	_____
1	Lavatory (1 & 1/4" Drain)	_____	_____	_____	_____
2	Lavatory (1 & 1/2" Drain)	_____	_____	_____	_____
2	Lavatory - barber, beauty parlor, bar sink, hand sink	_____	_____	_____	_____
2	Lavatory - surgeon's, exam sink	_____	_____	_____	_____
2	Laundry tray (1 or 2 compartments)	_____	_____	_____	_____
2	Shower stall, domestic	_____	_____	_____	_____
3	Showers (group) per head	_____	_____	_____	_____
3	Sinks - surgeon's	_____	_____	_____	_____
8	Flushing rim (with valve)	_____	_____	_____	_____
3	Service (trap standard) (Indirect Waste)	_____	_____	_____	_____
2	Service (P trap) self contained or remote to indirect	_____	_____	_____	_____
4	Pot, scullery, etc.	_____	_____	_____	_____
8	Urinal, pedestal, syphon jet, blowout	_____	_____	_____	_____
4	Urinal, wall lip	_____	_____	_____	_____
4	Urinal stall, washout	_____	_____	_____	_____
2	Bathtub	_____	_____	_____	_____
3	Washing Machine (residential)	_____	_____	_____	_____
2	Wash sink (circular or multiple) each set of faucets	_____	_____	_____	_____
5	Commercial washing machine	_____	_____	_____	_____
TOTALS:		_____	_____	_____	_____

WATER TOTAL UNITS _____ X \$62.24 = \$ _____
 SEWER TOTAL UNITS _____ X \$81.34 = \$ _____
 TOTAL FEE \$ _____

SIGNATURE OF APPLICANT: _____ DATE: _____

APPROVED BY: _____ DATE: _____

VERIFIED BY: _____ DATE: _____