

## **UTILITY IMPACT FEE FORM**

City of New Port Richey Development Department City Hall, 5919 Main Street, 1st Floor New Port Richey, FL 34652 Phone: (727) 853-1047 Fax: (727) 853-1052

Customer:					
Building Address:					
Property Appraiser ID:					
If the building is a single-family home, t	he fees are the f	ollowing:			
					Water \$1,158
					Sewer \$2,262
If the building is a duplex or a tri-plex, n	nultiply the sing	le-family r	number by 2 or 3		
Check One	Property is in city limits of New Port Richey				
	Property is in unincorporated Pasco County				
Use the following chart to determine im	pact fees for all	other str	uctures:		
<u>Fixture</u>	<u>Fixture Value</u>	Multiply	Number of Fixtures	<u>Equals</u>	<u>Total Fixture Value</u>
Bathtub	8	X		=	
Bedpan Washers	10	X		=	
Bidet	2	X		=	
Dental Units	2	X		=	
Drinking Fountain	2	X		=	
Kitchen Sink	2.2	Х		=	
Lavatory	1.5	Х		=	
Showerhead (Only)	2.5	Х		=	
Service Sink	4	Х		=	
Toilet – Flush Valve	35	X		=	
Toilet – Tank Type	4	Х		=	
Urinal – Pedestal Valve	35	Х		=	
Urinal – Wall Flush	16	Х		=	
Wash Sink	4	X		=	
Dishwasher	2	Х		=	
Washing Machine	6	Х		=	
Hose (50' wash down)					
½ inch	5	Χ		=	
5/8 inch	9	X		=	
¾ inch	12	X		=	
Irrigation: Per 100 SF of greenspace	0.40	X		=	
Total Fixture Value				=	
DIVIDED BY 12 (If not divisible by 12, ro	ll-up to next nur	nber divis	ible by12)		
Total					
Multiply total by Water (\$1,158), Sewer	(\$2,262) Charg	e or Both	(\$3,420) depending on	service (	desired
TOTAL IMPACT FEE				=	

I hereby certify that the numbers indicated in this form is correct. If these numbers are later to be found incorrec I acknowledge that I may be asked to pay an additional amount.			
Property Owner			
I certify as the licensed (circle one) Engineer Architect Contractor on this project that the numbers on this form are correct.			
Signature			
Reviewed: Public Works Department			
Reviewed: Development Department			
Please bring this form to the Finance Department for payment			