

West Manatee Fire & Rescue District
701 63rd Street West
Bradenton, FL 34209
941-761-1555 Fax 941-237-3935

IMPACT FEE INFORMATION SHEET

Make check payable to: **WEST MANATEE FIRE & RESCUE DISTRICT OR WMFRD**

Owner/Project Name: _____

Owner/Project Phone #: _____ Permit #: _____

Builder Name: _____ Phone #: _____

Property Physical Address: _____

City: _____

Parcel ID #: _____

Lot/Block #: _____

TYPE OF CONSTRUCTION

Square Footage: _____ (*Total under roof including non-air-conditioned space*)

Residential: # of living units _____ x \$500.00 = \$ _____ **OR**

Commercial:

A. First 5,000 square feet of building – base rate = \$980.00 **PLUS**

B. Square footage greater than 5,000 = \$ _____

TOTAL (A + B) \$ _____

Date payment received: ____/____/____ Check #: _____ Amount: \$ _____

Printed Name of WMFR Representative: _____

Signature of WMFR Representative: _____