



Impact Fee Certification

Date _____

Recipient's Name _____

Address _____

☐ **PROJECT SPECIFIC FEE CERTIFICATION**

Project Name _____

Address of Project _____

Proposed Use of Building _____

Unit of Measure _____ Number of Units _____

Impact Fee per Unit \$ _____ Total Impact Fee \$ _____

☐ **FEE SCHEDULE CERTIFICATION**

The Impact Fee Schedule in effect on the date recorded above is attached and must remain attached for the Certificate to remain valid.

Signature of Recipient

By this form, the City hereby certifies that the Impact Fee Certification shall be applicable for 180 calendar days from the date recorded above, provided that a copy of this certification form is presented at the time of impact fee assessment.

Signature of the City of Milton Impact Fee Administrator or designee.

Once completed, this form can be submitted in one of these three ways:

- 1) Dropped off at Milton City Hall (2006 Heritage Walk) during normal business hours
- 2) Mailed to City Hall, 2006 Heritage Walk, Milton, GA 30004, ATTN: Community Development
- 3) Scanned and emailed to impactfees@miltonga.gov