



FORM-007

## Development Impact Fee Notice and Acknowledgment

**Project Address:** \_\_\_\_\_  
**Project Number:** \_\_\_\_\_

I, \_\_\_\_\_, execute this Development Impact Notice and Acknowledgement as a condition to the issuance of a building permit at the stated project address.

Initials Req'd

\_\_\_\_\_ I am aware that I am required to pay the following Development Impact Fees (DIF), as stated in Chapters 18.15, 18.16, 18.17, and/or 18.18 of the Long Beach Municipal Code, on all new residential and non-residential developments.

- Transportation Improvement     
  Park & Recreation Facilities     
  Police Facilities     
  Fire Facilities

\_\_\_\_\_ I am aware that the DIF must be paid **prior** to issuance of the final inspection, Temporary Certificate of Occupancy, or Certificate of Occupancy, whichever comes first.

\_\_\_\_\_ Furthermore, I am aware that payment can only be made either in cash or cashier's check.

The applicable DIF are calculated as follows

**RESIDENTIAL:**

Transportation Improvement	Park and Recreation Facilities	Police Facilities	Fire Facilities
<u>Citywide</u> \$1,125.00 x _____ dwelling units =	<u>Single Family or Duplex</u> \$4,613.04 x _____ dwelling units =	<u>Single Family</u> \$703.00 x _____ dwelling units =	<u>Single Family</u> \$496.00 x _____ dwelling units =
<u>Accessory, up to 220 sq ft</u> \$236.25 x _____ dwelling units =	<u>Multi Family Dwelling (3 or more)</u> \$3,562.78 x _____ dwelling units =	<u>Multi Family Dwelling (2 or more)</u> \$537.00 x _____ dwelling units =	<u>Multi Family Dwelling (2 or more)</u> \$378.00 x _____ dwelling units =
<u>Secondary, up to 640 sq ft</u> \$663.75 x _____ dwelling units =	<u>Manufactured Housing/Mobile Home</u> \$2,619.63 x _____ dwelling units =	<u>ADU</u> \$342.86 x _____ dwelling units =	<u>ADU</u> \$241.74 x _____ dwelling units =
<u>Senior Citizen</u> \$663.00 x _____ dwelling units =	<u>Loft/Studio/ADU</u> \$1,781.39 x _____ dwelling units =		

**RESIDENTIAL TOTAL =** \_\_\_\_\_

**COMMERCIAL:**

Transportation Improvement	Transportation Improvement	Police Facilities	Fire Facilities
<u>Citywide - Office</u> \$2.00 x _____ sq ft =	<u>Downtown - Office</u> \$3.00 x _____ sq ft =	<u>Commercial</u> \$0.44 x _____ sq ft =	<u>Commercial</u> \$0.27 x _____ sq ft =
<u>Citywide - Retail</u> \$3.00 x _____ sq ft =	<u>Downtown - Retail</u> \$4.50 x _____ sq ft =	<u>Office</u> \$0.54 x _____ sq ft =	<u>Office</u> \$0.33 x _____ sq ft =
<u>Citywide - Hotel</u> \$750.00 x _____ guest rooms =	<u>Downtown - Hotel</u> \$1,125.00 x _____ guest rooms =	<u>Industrial</u> \$0.22 x _____ sq ft =	<u>Industrial</u> \$0.13 x _____ sq ft =
<u>Citywide - Movie</u> \$140.00 x _____ seats =	<u>Downtown - Movie</u> \$90.00 x _____ seats =		
<u>Citywide - Industrial</u> \$1.10 x _____ sq ft =	<p style="text-align: center;"><b>COMMERCIAL TOTAL = _____</b></p>		
<u>Citywide - Warehouse</u> \$1.10 x _____ sq ft =			
<u>Citywide - Self Storage Facility</u> \$0.29 x _____ sq ft =	<div style="border: 2px solid black; padding: 10px; text-align: center;"> <p><b>GRAND TOTAL =</b> (Residential + Commercial)</p> </div>		

**Please be advised** that the 90-day appeal period in which you may protest any fees, dedications, reservations or other exactions will begin after the applicant pays the required fee. Please note that the fees are predicated upon rates currently in effect. Your liability may be changed if the City

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Print Name of Owner Address Phone Number

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Print Name of Authorized Agent Title Phone Number

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Signature of Owner or Authorized Agent Date

**Payment accepted either by cash or cashier's check only.**