



NEWNAN
GEORGIA

CITY OF NEWNAN

25 LaGrange Street
Newnan, Georgia 30263
770-254-2354

COMMERCIAL IMPACT FEE APPLICATION – For use in requesting an impact fee quote

Name of Applicant or Contractor: _____

Building Address (Property Owner’s Address Verification showing proof of address)

Telephone: _____ E-mail: _____

Property Owner (if different than applicant): _____

Address: _____

Telephone: _____

Name of Establishment: _____

Type of Establishment: _____

Square Feet: _____

I (We) do hereby certify the information provided herein is both complete and accurate to the best of my (our) knowledge, and I (we) understand any inaccuracies may be considered just cause for invalidation of this application and any action taken on this application.

Applicant’s Representative (Please Print)

Signature of Applicant’s Representative

*****Once the address has been verified, should the address be changed by the applicant/owner, then a refund of the original impact fee will occur and a new impact fee payment & application for the new address will have to be submitted.**