



School Impact Fees

DATE: _____

TO: DIXON UNIFIED SCHOOL DISTRICT

FROM: COMMUNITY DEVELOPMENT DEPARTMENT, BUILDING DIVISION

SUBJECT: REQUIRED SCHOOL IMPACT FEES - AB 2926

The owner/applicant, _____ has submitted a building permit application
for the following address: _____
at Assessor Parcel Number: _____ Lot No: _____.

(If available)

The owner/applicant has complied with all plan submittal and building department requirements.

The Building Department has reviewed the construction drawings for compliance to applicable California Building Codes and is ready to issue the permit upon the return of the original copy of this form, signed by the duly authorized Dixon Unified School District official, ALONG WITH A RECEIPT indicating that the school fees have been paid.

Square Footage (Living Area): _____

Use: _____
(Enter type of use, Single Family Residential, Multi Family Residential, Commercial or Industrial)

*****FOR D.U.S.D. USE ONLY*****

The undersigned affirms that all fees required by the School District, pursuant to authorization in California Assembly have been paid. *These fees are Bill AB 2926.

Subject to: School **Impact Fee** or **DFD No. 1** (circle one)

Amount Paid: _____

Authorized By: _____

Date: _____

Title: _____

City of Dixon

Community Development Department – Building Division

600 East A Street, Dixon, CA 95620

(707) 678-7000 x1789 • Building Division

buildingdivision@cityofdixonca.gov

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