## CITY OF PALM BAY BUILDING PERMIT FEE REDUCTION PROGRAM APPLICATION

1.	ies who will review the application in accordance with Resolution 2025-11.  Property Address:  ——————————————————————————————————
2.	Property Owner Name:
	Address:
	Telephone No Cell No
3.	Type of industry or business:
4.	Anticipated number of new employees in the first year:
5.	As of the date of this application, what is the number of full-time employees at the Palm Bay location (Existing Buildings Only)?
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hereby alm B omple ederal,	y confirm the information provided byto the City of Bay for the purpose of calculating the Building Permit Fee Reduction is true, accurate and te. I further confirm thatis not in violation of an
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