APPROVED in Open Session
5/19/2026
Manatee County Board of County Commissioners

Manatee County Government
Development Services Department
Mailing Address: P.O. B.ox 1000, Bradenton FL 34206
Office Location: 9000 Town Center Pkwy

MEMORANDUM

To: Vicki Tessmer, Supervisor, Board Records

Approved by: Nicole M. Knapp, Director of Development Services *Nicole M. Knapp*

Through: Rachel W. Layton, Division Manager/Impact Fee Administrator *Rachel Layton*

Date: April 27, 2026

Subject: Refund Request

Refund Request Information

Petitioner:

Dr Horton Inc
5901 N. Honore Ave Suite 250
Sarasota, FL 34243

Reason for Request:

Impact fees were paid double due to the error on the application. We submitted the dwelling unit as 2 instead of 1. This record is a villa.

Payment Information:

Refund Amount: $6,662.75

Fee Description:

Transportation Impact Fee Southeast district (182-0000000-363240) = $4,541

LAW Residential Impact Fee (8270000000-363221) = $479.25

Library Residential Impact Fee (8240000000-363272) = $244.75

Parks & Natural Resources Residential Impact Fee (8260000000-363271) = $1,158.75

Public Safety Residential Impact Fee (8280000000-363222) = $239.00

Date of Original Payment	Permit Number	Invoice Number	Amount
04/04/2025	2501-5205	689232	$4,541
04/04/2025	2501-5205	689232	$479.25
04/04/2025	2501-5205	689232	$244.75
04/04/2025	2501-5205	689232	$1,158.75
04/04/2025	2501-5205	689232	$239.00

Prepared by:

Alissa Godek, Impact Fee Technician. impactfees@mymanatee.org

Disclaimer:

To protect individual privacy and to adhere to Payment Card Industry security standards, backup information for this transaction has been omitted. You may request materials related to this transaction by making a Public Records request online at www.mymanatee.org/records or by calling (941) 742-5845.

Manatee County
Board of County Commissioners
Audit Slip

AUDIT SLIP NUMBER
AS SKF0209

DR HORTON INC
Vendor Name

5901 N. HONORE AVE SUITE 250
Address

SARASOTA FL 34243
City State Zip Code

941-308-0413
Phone Number

I hereby certify that the materials or services have been received, inspected and found satisfactory for the purpose for which they were purchased.
(ONLY COMPLETE IF ITEMS HAVE BEEN RECEIVED)

Received by Date

Nicole M. Knapp
Payment Authorized by:
Director Development Services

Dept/Div
Development Services/ Impact Fees

Contact Person
Alissa Godek/ Ext:3836

Phone

REASON FOR PURCHASE: AN ERROR ON THE APPLICATION. WE SUBMITTED THE DWELLING UNIT AS 2. SINCE THIS IS A VILLA ALONG WITH PERMIT BL

ITEM	GENERIC DESCRIPTION	QTY	UNIT	AMOUNT	ACCT KEY	OBJ	JLNUMBER	ACTIVITY
1	Roads Residential Impact Fee- SE			$4,541.00	1820000000	363240		
1	LAW Residential Impact Fee			$479.25	8270000000	363221		
1	Library Residential Impact Fee			$244.75	8240000000	363272		
1	Parks & Natural Resources Residential			$1,158.75	8260000000	363271		
1	Public Safety Residential Impact Fee			$239.00	8280000000	363222		

TOTAL AMOUNT **$6,662.75**

FINANCE USE ONLY

DESC _____ PE ID _____ PO _____

INV NUMBER _____ INV AMT $ _____ INV DATE _____

DUE DATE _____ TERMS _____ DISCOUNT _____ SEP CK _____

RELATE CODES _____ SEC REF _____ DIVISION _____

VENDOR ACCT # _____

REQUEST FOR IMPACT FEE REFUND

Requests for refunds shall be in accordance with LDC 1105 and shall be accompanied by a receipt, cancelled check, or other evidence of fees paid. Approved refunds will be remitted to the payee of the impact fee payment, or to a successor-in-interest.

Date of Request: 02/18/26

Permit No: BLD- 2501-5205

Permit Issuance Date: 03/04/2025

Amount Requested: $ 6,662.75

Petitioner's Name: Daniela Ojeda

Telephone Number: 941-308-0413

Fee Payer (Person/Contractor/Company): DR HORTON INC

Successor-in-interest (if applicable):

Address for Refund Check: 5901 N. Honore Ave Suite 250 Sarasota Fl 34243

REASON FOR REFUND REQUEST:

Impact fees were paid double due to an error on the applications. We submitted the dweling unit as 2
Since this is a villa along with permit BLD2501-5192 that also has double fees paid

APPLICANT SIGNATURE AND DATE:

Daniela Ojeda
Signature

02/18/2026
Date

Daniela Ojeda
Printed Name

FOR STAFF USE

Account Number:	182-0000000-363240	Amount:	$4,541
Account Number:	8260000000363271	Amount:	$1,158.75
Account Number:	8270000000363221	Amount:	$479.25
Account Number:	8280000000363222	Amount:	$239.00
Account Number:	8240000000363272	Amount:	$244.75
Account Number:		Amount:	

TOTAL REFUND: $ $6,662.75

Permit Notes Updated: [x] Yes [ ] No

Manatee County Impact Fee Administration
(941) 748-4501 x3844
www.mymanatee.org/impactfees