

**St. Johns County BCC  
Central Cashiering  
Cashier # 20-059207**

**Name :**

**Trans Date:** 10/27/2020 11:37:35 AM

**Charges:**

<b>Description</b>	<b>Assoc</b>	<b>Assoc Key</b>	<b>Charge Amount</b>
*FL BCAIB SURCHARGE(468.631)	BL	12004337	\$7.50
*FL DBPR SURCHARGE(553.721)	BL	12004337	\$5.00
BLDG PERMIT FEE	BL	12004337	\$320.00
Fire Plan Check Fee Ttl Fee \$121.00 - Credit \$121.00	BL	12004337	\$0.00
Permit Issuance Fee	BL	12004337	\$20.00
PLAN CHECK FEE Ttl Fee \$160.00 - Credit \$160.00	BL	12004337	\$0.00
IF Comm < 100K ft~Building (FY20) ExistingSqFt -1964Max Adj	IF	C2011-000400*008	(\$1,543.70)
IF Comm < 100K ft~Fire (FY20) ExistingSqFt -1964Max Adj	IF	C2011-000400*008	(\$137.48)
IF Comm < 100K ft~Park Dist3 (FY20) ExistingSqFt -1964	IF	C2011-000400*008	\$0.00
IF Comm < 100K ft~Police (FY20) ExistingSqFt -1964Max Adj	IF	C2011-000400*008	(\$720.79)
IF Comm < 100K ft~Road Dist3 (FY20) ExistingSqFt -1964	IF	C2011-000400*008	(\$6,290.69)
IF Comm < 100K ft~Schools (FY20) ExistingSqFt -1964	IF	C2011-000400*008	\$0.00
IF Medical Office~Building (FY20) SqFt 1964	IF	C2011-000400*008	\$1,543.70
IF Medical Office~Fire (FY20) SqFt 1964	IF	C2011-000400*008	\$137.48
IF Medical Office~Park Dist3 (FY20) SqFt 1964	IF	C2011-000400*008	\$0.00
IF Medical Office~Police (FY20) SqFt 1964	IF	C2011-000400*008	\$720.79
IF Medical Office~Road Dist3 (FY20) SqFt 1964	IF	C2011-000400*008	\$13,323.78
IF Medical Office~Schools (FY20) SqFt 1964	IF	C2011-000400*008	\$0.00
<b>Total</b>			<b>\$7,385.59</b>

**Payment:**

<b>Description</b>	<b>Charge Amount</b>
Check 283100274	\$7,385.59