



Larimer County Engineering Dept.
 200 West Oak Street, Suite 3000
 Fort Collins, CO 80521
 970-498-5700
www.larimer.org/engineering

2011 Transportation Capital Expansion Fee Schedule

Effective April 1, 2011

Land Use Type	Unit of Measure	County	Regional	Total * Per Unit
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Residential

Single Family Detached	1 Dwelling	\$2,595	\$ 251	\$2846
Cabin (30% of single family detached)	1 Dwelling	\$ 779	\$ 76	\$855
Accessory Living Area - Attached	1 Dwelling	no fee	no fee	no fee
Accessory Living Area - Detached	1 Dwelling	\$1,822	\$ 176	\$1,998
Extended Family (3 yr permit)	1 Dwelling	\$ 390	\$ 38	\$428
Farmstead Accessory Living	1 Dwelling	\$2,595	\$ 251	\$2,846
Hotel/Motel	1 Room	\$2,419	\$ 235	\$2,654
Mobile Home Park	1 Site	\$1,355	\$ 132	\$1,487
Multi-Family	1 Dwelling	\$1,822	\$ 176	\$1,998

* Transportation Capital Expansion Fee is calculated by multiplying unit by total \$ per unit

Retail/Commercial

Auto Sales	1,000 sq ft	\$4,722	\$ 455	\$5,177
Auto Service/Repair/Tire Store	1,000 sq ft	\$2,890	\$ 278	\$3,168
Bank	1,000 sq ft	\$15,157	\$1,464	\$16,621
Building Materials/Hardware/Nursery	1,000 sq ft	\$6,587	\$ 637	\$7,224
Convenience Store	1,000 sq ft	\$38,676	\$3,734	\$42,410
Discount Store	1,000 sq ft	\$4,762	\$ 461	\$5,223
Furniture Store	1,000 sq ft	\$1,037	\$ 100	\$1,137
General Retail <100,000 sq ft	1,000 sq ft	\$9441	\$ 912	\$10,353
General Retail 100,000-500,000 sq ft	1,000 sq ft	\$6,696	\$ 646	\$7,342
General Retail 500,001-1,000,000 sq ft	1,000 sq ft	\$5,531	\$ 534	\$6,065
General Retail > 1 million sq ft	1,000 sq ft	\$4,447	\$ 428	\$4,875
Movie Theater	1,000 sq ft	\$16,008	\$1,546	\$17,554
Restaurant, Fast Food	1,000 sq ft	\$22,607	\$2,182	\$24,789
Restaurant, Sit-Down	1,000 sq ft	\$7,789	\$ 751	\$8,540

* Transportation Capital Expansion Fee is calculated by multiplying unit by total \$ per unit

Office/Institutional

Church/Synagogue	1,000 sq ft	\$2,344	\$ 229	\$2,573
Day Care Center	1,000 sq ft	\$4,889	\$ 475	\$5,364
Elementary/Secondary School	1,000 sq ft	\$1,864	\$ 181	\$2,045
Hospital	1,000 sq ft	\$4,519	\$ 437	\$4956
Medical Office	1,000 sq ft	\$9,289	\$ 901	\$10,190
Nursing Home	1,000 sq ft	\$1,594	\$ 156	\$1,750
Office, General <100,000 sq ft	1,000 sq ft	\$4,209	\$ 410	\$4,619
Office, General >200,000 sq ft	1,000 sq ft	\$3,270	\$ 320	\$3,590
Office, General 100,000 - 200,000 sq ft	1,000 sq ft	\$3,589	\$ 349	\$3,938

Industrial

General Light Industrial/Industrial Park	1,000 sq ft	\$2,197	\$ 214	\$2,411
Mini-Warehouse	1,000 sq ft	\$ 789	\$ 77	\$866
Warehouse	1,000 sq ft	\$1,566	\$ 152	\$1,718

Note: Final fee calculation is done by the TCEF Administrator



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Transportation Capital Expansion Fee (TCEF) Calculation Form

Fee Schedule on back of page

General Project Information	Building Staff Use
	Permit No. _____
Business Name _____	
Business Address _____	City _____
Parcel Number _____	
Subdivision Name & Lot # _____	
Fee Estimate Calculated Y /N ? _____	Floor Plan Attached Y/N ? _____

Types of Uses

Retail/Commercial	Area (Sq Ft)	*Description of 'Other' Use
Auto Sales	_____	
Auto Service/Repair/Tire Store	_____	
Bank	_____	
Building Materials/Hardware/Nursery	_____	
Convenience Store	_____	
Discount Store	_____	
Furniture Store	_____	
General Retail < 100,000 sq ft	_____	
General Retail 100,000 - 500,000 sq ft	_____	
General Retail 500,001 - 1,000,000 sq ft	_____	
General Retail >1 million sq ft	_____	
Movie Theater	_____	
Restaurant, Fast Food	_____	
Restaurant, Sit-down	_____	
Office/Institutional		Description of Previous Use
Church/Synagogue	_____	If a previous or existing business paid TCE fees, a credit may apply to the calculation
Day Care Center	_____	
Elementary/Secondary School	_____	
Hospital	_____	
Medical Office	_____	
Nursing Home	_____	
Office, General < 100,000 sq ft	_____	
Office, General 100,000 - 200,000 sq ft	_____	
Office, General > 200,000 sq ft	_____	
Industrial		
General Light Industrial/	_____	
Industrial Park	_____	
Mini Warehouse	_____	
Warehouse	_____	
Other (include description*, at right)	_____	Building Staff Use
Total Finished Sq Ft	_____	'Previous Use' Building Permit No. _____

Applicant Information and Signature

Applicant _____ Date _____
 Please print name

Signature _____ Phone _____