

CERTIFICATION  
For Implementation of  
Regulatory Reform Activities  
Required by S.H.I.P.

On behalf of Sumter County, I hereby certify that the following information  
(NAME OF LOCAL GOVERNMENT)  
is true and accurate as of the date of submission:

- 1) Permits as defined in s.163.3164(7) and (8)\* for affordable housing projects are expedited to a greater degree than other projects; and
- 2) There is an ongoing process for review of local policies, ordinances, regulations, and plan provisions that increase the cost of housing prior to their adoption.
- 3) The cumulative cost per newly constructed housing per housing unit, from these actions for \*\*FY2010 is estimated to be \$ 1,201.00.
- 4) The cumulative cost per rehabilitated housing per housing unit, from these actions for \*\*FY2010 is estimated to be \$ 11.00.

\_\_\_\_\_  
Date  
Witness  
\_\_\_\_\_  
Date  
Chief Elected Official

Doug Gilpin, Chairman, Board of County Commissioners  
(Type) Name and Title

\_\_\_\_\_  
Date  
Witness  
\_\_\_\_\_  
Date  
County/City Administrator  
(whichever applies)

\_\_\_\_\_  
(Type) Name and Title

Or

\_\_\_\_\_  
Date  
Attest (Seal)

\* 163.3164(7) of the Florida Statutes: "Development order" means any order granting, denying, or granting with conditions an application for a development permit. 163.3164(8) of the Florida Statutes: "Development permit" includes any building permit, zoning permit, subdivision approval, rezoning, certification, special exception, variance, or any other official action of local government having the effect of permitting the development of land.

# CERTIFICATION

On behalf of Sumter County, I hereby certify that the information presented  
(NAME OF LOCAL GOVERNMENT)  
herein is true and accurate as of the date of submission.

\_\_\_\_\_  
Date \_\_\_\_\_ Date 8/24/10  
Witness Chief Elected Official or Designee

\_\_\_\_\_  
Date \_\_\_\_\_ Date 8/24/10  
Witness Doug Gilpin, Chairman  
(Type) Name and Title

Or

\_\_\_\_\_  
Date \_\_\_\_\_  
Attest (Seal)

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## GENERAL INFORMATION

Name of Person to call regarding the **Annual Report** Form:

Kathy Young

Telephone Number: (352) 793-0272

SHIP AR/07