

Chief Executive Officer

DEPARTMENT OF PLANNING & SUSTAINABILITY

Director

Lorraine Cochran-Johnson

Juliana A. Njoku

Refund Request Form

Person or Company authorized to receive the refund		
PhoneEmail		
Application/Permit #	Amount you are request	ing \$Please attach receipt
Type of Permit or Description of Fee		
Reason for the request		
Permit/Application Address		
Where should we send the refund check? Street Address _		
City	State	Zip
Permits over one year old, and/or permits that have have refunds. If reviews have been completed, only 50% can Only the person or company listed on the check, credit will be eligible to receive the refund. I do solemnly swear that I am the person, or company in this refund. I further certify that the above information	n be refunded. Techno card, or money order t representative, lawfull	logy Fees are non-refundable. used to pay for the permit or application y authorized to request and/or receive
Print Name		
Signature	Date	
	Office Use:	
Approved Denied Reason/Comments:		
Approved/Denied by		