

Chief Executive Officer
Lorraine Cochran-Johnson

DEPARTMENT OF PLANNING & SUSTAINABILITY

Director
Juliana A. Njoku

Refund Request Form

Person or Company authorized to receive the refund _____

Phone _____ Email _____

Application/Permit # _____ Amount you are requesting \$ _____
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 had any inspection(s) or work performed are not eligible for refunds. If reviews have been completed, only 50% can be refunded. Technology Fees are non-refundable.

Only the person or company listed on the check, credit card, or money order used to pay for the permit or application will be eligible to receive the refund.

I do solemnly swear that I am the person, or company representative, lawfully authorized to request and/or receive this refund. I further certify that the above information is truthful and correct.

Print Name _____

Signature _____ Date _____

Office Use:

☐ Approved ☐ Denied Reason/Comments: _____

Approved/Denied by _____
