



## APPLICATION FOR REFUND

Date: \_\_\_\_\_

District Office:  Ventura  Simi Valley

Request is hereby made pursuant to Ventura County Building Code, Section 109.6 for a refund of Permit, Plan Review and/or associated fees paid to the Division of Building and Safety.

Permit Application/Record Number: \_\_\_\_\_

Project Address: \_\_\_\_\_ City: \_\_\_\_\_

Claimant Name: \_\_\_\_\_ (Original maker of payment, if known...or Applicant)

Claimant Mailing Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Reason/Justification for Refund Request:

\_\_\_\_\_  
\_\_\_\_\_

I hereby certify this information is true and correct to the best of my knowledge, and that I am the owner or authorized agent entitled to a refund of the fees for this project, and that no claim has been previously submitted or paid in connection with this construction project.

Signature of Claimant : \_\_\_\_\_

## Building and Safety Staff Use Only

A copy of payment receipt, Inspector's permit, and refund calculation worksheet must be attached with this request.

Type of Refund:  Plan Review  Permit Fee  Other \_\_\_\_\_

Reason for Refund:  Fees Erroneously Collected (100%)  Cancellation Prior to Start of Work (90%)

Other : \_\_\_\_\_

Application for Refund Verified by: \_\_\_\_\_

Permit Technician

Date Submitted to Building and Safety: \_\_\_\_\_

Approval of Refund: \_\_\_\_\_

District Manager

Building Official