



CITY OF ESCALON

DEVELOPMENT SERVICES

2060 McHenry Avenue • Escalon, California 95320 • Office 209.691.7422 Fax 209.691.7439 • Email dtrejo@cityofescalon.org

REQUEST FOR REFUND/PERMIT CANCELLATION FORM

SECTION I. JOB ADDRESS: (Please print clearly)			
Address:			
SECTION II. REQUESTOR'S INFORMATION: (Please check all that apply)			
REFUND	CANCELLATION <i>(for permits approved and issued)</i>	WITHDRAWAL <i>(for permit applications that have not been issued)</i>	
Owner	Contractor	Other: _____	
Name (First, Last)		Company Name	
Phone:	Fax:	Email:	
<i>Refund Check Made Payable to:</i> (Please print clearly)		<i>Where to Send Refund to:</i> (Please print clearly)	
Name (First, Last)		Address	
Company Name		City, State, Zip	
SECTION III. TYPE OF PERMIT TO BE REFUNDED: (<u>Only</u> provide ONE number per permit application type per job address per form)			
Building Permit	Plumbing Permit	Electrical Permit	Other: <i>(e.g., Street Space, etc.)</i>
Permit/Application Number:			
SECTION IV. REASON FOR REQUESTING REFUND/PERMIT CANCELLATION: (Please print clearly)			
SECTION V. ATTACHMENT: (Please Check All Applicable; All Documents for Building Permit Cancellation MUST Be Original)			
Building Permit Application	Issued Building Permit	Job Card – if permit issued	Authorization Letter to Release Refund to 3 rd Party (if applicable)
Issued Plumbing Permit	Issued Electrical Permit	Board of Appeals Decision Notification	Others (please specify):
SECTION VI. CERTIFICATION			
Signature:			Date of Request:
FOR COE STAFF USE ONLY			
Reviewed by:	First Name:	Last Name:	
Notes:			
Permit Status:	<input type="checkbox"/> OK to Cancel	<input type="checkbox"/> OK to refund	<input type="checkbox"/> Other:
			Date Stamp



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INSTRUCTIONS TO COMPLETE AND FILE A REFUND REQUEST FOR FEES PAID TO THE BUILDING DEPARTMENT

This REQUEST FOR REFUND FORM is used for the purpose of cancellation/or a refund for fees paid to the Building Department.

- To obtain a refund, please provide all the requested information.
- To avoid delays in processing your refund request, please write as neatly as possible.
- Please keep copies of all documents; original documents will NOT be returned.
- Refund requests can be hand delivered or mailed to: **Building Department
City of Escalon
2060 McHenry Ave.
Escalon CA 95320**
- To check on the status of a refund, please call (209) 691-7422 and leave a message or send e-mail to: building@cityofescalon.org.

INSTRUCTIONS TO COMPLETE FORM:

SECTION I: JOB ADDRESS (top of form)

- Provide the Job Address for which a refund is being requested.

SECTION II: REQUESTOR'S INFORMATION

- Check appropriate boxes.
- Print legibly your first and last names, including company name if applicable.
- Provide your contact information in case of questions.
- Provide name and address of the party to receive the refund check.
*****NOTE: If the name of the person/company receiving the check is different from the payer of the permit, a written authorization letter from the payer is required before funds can be disbursed.**

SECTION III: TYPE OF PERMIT TO BE REFUNDED

- Provide applicable permit application numbers for which a refund is being requested for the job address.
*****NOTE: (A) Do NOT omit or transpose any digits or characters. (B) ONLY provide one (1) number per permit application type per job address per form.**

SECTION IV: REASON FOR REQUESTING REFUND/PERMIT CANCELLATION

- State reason(s) why a refund is being requested for the permit application.
*****NOTE: To avoid denial of refund, please be clear and concise.**

SECTION V: ATTACHMENT

- Check all appropriate boxes and attach documents.
*****NOTE: All documents for Building Permit cancellation MUST be original; NO photocopies or facsimiles will be accepted. Copies of electrical or plumbing are accepted.**

SECTION VI: CERTIFICATION

- Sign and date.