

Request for Refund and/or Withdrawal of Application

Application/Permit Number(s): _____

Has Work Been Started: ☐ Yes ☐ No

Reason for Request: _____

I hereby certify that the information provided is true and correct. I understand that a refund (if applicable) will be issued to the designated Financially Responsible Party, and that payment has not been received:

Requestor's Name: _____

Street Address: _____

City and Zip Code: _____

Telephone Number: _____

Requestor's Signature: _____ Date: _____

Property Owner Name: _____

Property Owner Signature: _____ Date: _____

(If Not Requestor)

You may email your form to OCPWPermitting@pw.oc.gov or call (714) 667-8888 for assistance.

FOR OFFICE USE ONLY

County Approval: _____ Date: _____

Amount of Refund: _____

Note: _____