

City of Modesto
REQUEST FOR REFUND OF PERMIT FEES
 Community & Economic Development Department
 Building Safety Division

Date: _____

Applicant/Company: _____

Address: _____

City, State, Zip Code: _____

Permit No. _____ Date Paid _____

Property Address: _____

Reason for Refund: _____

I declare under penalty of perjury the foregoing is true and correct to the best of my knowledge and belief:

 Company

 Date

 Authorized Signature

 Title

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY

	Fund	Agency	Organization	Revenue Source	Sub Revenue	B. S. Account	Amount
Bldg Permit	0100	140	1401	4002			
Plumbing	0100	140	1401	4003			
Electrical	0100	140	1401	4004			
Mechanical	0100	140	1401	4005			
Gen Plan Maint Recovery	0100	140	1430	4151			

TOTAL AMOUNT TO REFUND: \$ _____

Refund Approved by: _____

Date: _____