PINAL COUNTY
DEVELOPMENT SERVICES

# REFUND REQUEST FORM

EMAIL TO: DEVELOPMENTSERVICESFINANCE.SHAREDMAILBOX@PINAL.GOV

## SECTION 1: REQUESTOR INFORMATION

**NAME:** _____

**MAILING ADDRESS** _____ **CITY:** _____, **ST:** ____ **ZIP:** _____

**EMAIL ADDRESS(ES):** _____

**PHONE(S) #:** _____

**RECORD ID/PERMIT #:** _____ **PROJECT TITLE:** _____

**REQUESTOR'S SIGNATURE:** _____ **DATE:** _____

## SECTION 2: REASON FOR REQUEST

_____

_____

_____

****NOTE: DEVELOPMENT SERVICES MAY REFUND UP TO 50% OF PERMIT FEES, BUT NOT AFTER CONSTRUCTION COMMENCES. EXPIRED PERMITS AND COMPLETED PLAN REVIEW AND ZONING FEES ARE NON-REFUNDABLE.****

| FOR OFFICE USE ONLY | INITIAL |
|---|---|
| BUILDING SAFETY: (ASSESED FEES) $_____ (REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| PLANNNING: (ASSESED FEES) $_____ (REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| IMPACT FEES: (ASSESED FEES) $_____(REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| CIVIL HEARING: (ASSESED FEES) $_____ (REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| AQUIFER PROTECTION: (ASSESED FEES) $_____ (REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| PUBLIC WORKS: (ASSESED FEES) $_____ (REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| AIR QUALITY: (ASSESED FEES) $_____(REFUND PERCENTAGE) _____% = (TOTAL REFUND) $_____ | |
| TOTAL REFUND: | |

**DEVELOPMENT SERVICES DIRECTOR APPROVAL:** _____ **DATE:** _____