



Planning and Building Agency
 Planning Division
 20 Civic Center Plaza
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www.santa-ana.org

Request for Refund of Planning Application Fees

Refund request forms must be complete and submitted with validated receipt and supporting documents.
 Refunds will ONLY be issued to the person or entity who made the payment.

APPLICATION INFORMATION:

PROJECT ADDRESS: _____
 APPLICATION # _____ RECEIPT # _____
 APPLICATION AMOUNT \$ _____ DATE OF APPLICATION: _____

REFUND MAILING INFORMATION:

NAME: _____
 ATTN / BUSINESS NAME (IF APPLICABLE): _____
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

APPLICANT INFORMATION:

NAME: _____
 PHONE: _____ EMAIL: _____

REASON FOR REFUND (check below):

- Duplicate applications
 - Copies of both applications must be provided
- Application was canceled/withdrawn by the applicant prior to being reviewed by staff
 - Cancellation or withdrawal letter must be provided
- Administrative error

- 1) Refunds will not be issued for applications for which a review has been performed by staff.
- 2) Refund requests need to be submitted within six (6) months of payment date.
- 3) A processing fee of fifteen percent (15%) will be deducted from the application fee.
- 4) A refund check will be issued; therefore, do not contact your bank to reverse credit/debit payments.
 - Please allow up to ninety (90) days for a refund.
- 5) Refunds are not guaranteed and are based on the review and approval of the request.

I certify that I have read the above and that conditions are true and have attached proof of payment to this form.

 APPLICANT NAME (PRINT)

 APPLICANT SIGNATURE

 DATE

STAFF USE ONLY

DATE RECEIVED: _____ MASTER ID: _____ RECEIPT ATTACHED

APPROVED DENIED REVIEWED BY: _____

REFUND AMOUNT: _____ ACCOUNT UNIT: _____

STAFF COMMENTS: _____
