

Department of Community Development

801 228th Avenue SE ■ Sammamish, WA 98075 ■ phone: 425-295-0500 ■ fax: 295-295-0600 ■ web: www.sammamish.us

REFUND REQUEST

Please submit refund requests to permittech@sammamish.us, and must include a copy of the receipt.

- Refunds may only be approved within **180 days** from date the application was submitted.
- Refunds shall not be issued for an application or plan review if the review has been completed.
- Plan review refunds shall not exceed 80% of fees paid when application is withdrawn or canceled prior the start of the plan review process.
- Permit refunds shall not exceed 80% of fees paid when no inspections have been completed.
- Refunds will only be issued to the payor of record that paid the fees.
- Please allow 3 weeks for processing.

APPLICATION INFORMATION			
Date of Application:		Date of Request:	
Application/Permit #:			
Project Address/PIN:			
Reason for Request:			
PAYOR INFORMATION			
Payor:		Company: if applicable	
Mailing Address: city/state/zip			
Email:		Phone:	
I understand the refund will be issued to the original payor of record that paid the aforementioned fees.			
Cianatura			
Signature		Date	
STAFF USE ONLY			
Refund	Refund		
Amount:	Approval:		Date: