

**Osceola County Building Office** 1 Courthouse Square, Suite 1400 Kissimmee, FL 34741 Ph: (407) 742-0200 Fax: (407) 742-0202

# **OSCEOLA COUNTY BUILDING OFFICE** PERMIT REFUND REQUEST

**NOTICE:** Refunds will not be granted on permits less than \$100.00. Refunds will not be considered unless the original permit card and approved plans are submitted with this request form. This request must be signed by both the owner and the contractor, and must be notarized. Refunds will only be considered if requested within 30 days of the issue date of the permit and provided the Building Office has made no inspections. Refund amounts are limited to 75% of the original permit fee in excess of \$100.00. **REFUNDS WILL ONLY BE ISSUED TO** THE PARTY RECEIPTED FOR PAYMENT ON PERMIT.

## SECTION A. CONTRACTOR INFORMATION

The information contained in this section must be completed and signed by the contractor of record and notarized.

Contractor Name:	License No.
Company Name:	
Company Address:	

, being the contractor of record on Permit No. I, do hereby request that a refund be processed to the authorized party for the above referenced permit.

Witness

Contractor Signature

Witness

Contractor Name (typed or printed)

STATE OF FLORIDA COUNTY OF OSCEOLA

(date) The foregoing instrument was acknowledged before me this \_\_\_\_\_ \_\_\_\_\_, who is personally known to me or who has produced by

(Name of person acknowledged)

as identification.

(Type of identification)

Sworn to and subscribed before me this Day of , 20 .

(Signature of Notary Public-State of Florida)

(Print or type name of Notary Public)

## OSCEOLA COUNTY BUILDING OFFICE PERMIT REFUND REQUEST

#### SECTION B. OWNER INFORMATION

The information contained in this section must be completed and signed by the owner(s) of the property and notarized.

I, \_\_\_\_\_, being the owner(s) of the property on Permit No.\_\_\_\_\_, do hereby request that a refund be processed to the authorized party for the above reference permit.

Witness

Owner Signature

Witness

Owner Signature

#### STATE OF FLORIDA COUNTY OF OSCEOLA

The foregoing instrument was acknowledged before me this \_\_\_\_\_\_(date) by \_\_\_\_\_\_, who is personally known to me and who has produced \_\_\_\_\_\_ as identification.

Sworn to and subscribed before me this day of \_\_\_\_\_\_,20\_\_\_\_.

(Signature of Notary Public-State of Florida)

(Print or type name of Notary Public)