



For Office Use	
Construction Permit #	_____
Date:	_____
Receipt #	_____
GL 802135.5	Code: 10-1008

RESTORATION BOND REFUND REQUEST

Date: _____ **Subdivision & Phase:** _____

Developer: _____ **Contact:** _____

Address: _____ **Phone:** _____

City: _____ **State:** _____ **Zip:** _____

Lots: _____ **Acres:** _____ **Bond Amount (\$1,000 Per Acre):** \$ _____

DATE REFUND REQUESTED: _____ **AMOUNT OF REFUND:** \$ _____

REASON FOR REFUND

Improvement Bond in place Warranty Bond in place

Refund Approved by: _____ Date: _____
City Engineer

Refund Approved by: _____ Date: _____
Building and Zoning

Verified Receipt of Bond: _____ Date: _____
City Treasurer

____ Attach copy of check, deposit slip/receipt, and original restoration bond check list application.
(Make a copy for Public Works, Building & Zoning and Treasurer)