



CREDIT/REFUND APPLICATION

Permit #: _____ Account Name: _____
Permit address: _____
Check payable to: _____ Phone #: _____
Mailing address: _____

Reason for Request: (check one)
[] [] [] Duplicate permit [] Other
Explain in detail:

Signature (Requestor): _____ Print name: _____
Phone #: _____ Email: _____ Date: _____

For office use only: [] Approved [] Denied Budget code: _____
Signature _____ Date: _____

Building Code Enforcement
500 North Main Street #47
Monroe, NC 28112
T 704-283-3816