



# Community Development Department Permit Fees Refund Request

2100 Thousand Oaks Boulevard • Thousand Oaks, CA 91362  
Planning Division • Phone 805/449.2323 • Fax 805/449.2350 • www.toaks.org  
Building Division • Phone 805/449.2500 • Fax 805/449.2575 • www.toaks.org

Completed refund request forms may be submitted via email at [communitydevelopment@toaks.org](mailto:communitydevelopment@toaks.org).

Permit number(s): \_\_\_\_\_

Project Address \_\_\_\_\_ City, State \_\_\_\_\_ ZIP \_\_\_\_\_

Permit type(s):  Building  Plumbing  Electrical  Mechanical Refund request date: \_\_\_\_\_

Payee Name (*refund to be made payable to*) \_\_\_\_\_ Name on receipt (*if different than refund payee*) \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Justification for refund request: \_\_\_\_\_

Payment Date: \_\_\_\_\_ Receipt Number: \_\_\_\_\_  
*(Copy of the original receipt(s) required)*

Method of Payment:  Check  Credit Card  Cash

**PROPERTY OWNER:**

I acknowledge that the refund will be made payable to the entity/person listed as the payee above. I understand that not all fees are refundable.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PAYEE:**

I acknowledge that the refund will be made payable to the entity/person listed as the payee above. I understand that not all fees are refundable.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**All signatures are required for processing. Wet signatures are required, Digital signatures are not accepted.**

**Per TOMC, issuance fee or fees for services rendered are retained at 100%.  
Remaining fees retained at 10%. Refund amount will be determined by the City.  
Permits issued in error (i.e., outside City limits) are fully refundable.**

Permit number(s): \_\_\_\_\_

**For Office Use Only**

Approved:  Yes  No

Refund Amount \$ \_\_\_\_\_

\_\_\_\_\_  
Building Official or Designee

\_\_\_\_\_  
Date

Comments: \_\_\_\_\_

Type	Perm#	Perm#	Perm#
<b>Plan Check (001-6110-422.21-01):</b>			
PC (B)			
Green Building Plan Check Fee			
<b>Building Permit (001-6110-422.01-01):</b>			
Building Permit Fees			
Issuance Fees			
Plan Maintenance Fee			
A Technology Fee			
Demolition			
Green Building			
<b>Plumbing Permit (001-6110-422.01-02):</b>			
Plumbing Permit Fees			
Plan Check - PC (P)			
<b>Electrical Permit (001-6110-422.01-03):</b>			
Electrical Permit Fees			
Plan Check- PC (E)			
<b>Mechanical Permit (001-6110-422.01-04):</b>			
Mechanical Permit Fees			
Plan Check- PC (M)			
SMIP (851-0000-205.20-00)			
STATE BSC FEE Building Standards – State (001-0000-205.21-00)			
Misc. _____ (001-6310-422.12-00)			
Disabled Access – Plan Check (001-6110-422.21-03)			
Disabled Access – Inspection (001-6110-422.01-05)			
State Energy Regulations (001-6110-422.21-02)			
Residential Resale - Report OR Open Permit Reinspect (001-6110-447.75-00)			
Other: _____ (a/c# _____)			
<b>TOTAL REFUND:</b>			