



Refund Request Form - For Escrow Accounts only

Please note requests for Escrow Account Refunds must be completed by an authorized signer/user for the Escrow Account. Please email to permits@stpete.org or submit in person at the Permitting office.

Applicant Name:

Applicant Signature:

Company Name of the Escrow Account:

Escrow Account#:

Refund to be issued to:

Name:

Mailing Address:

City:

State:

Zip Code:

Reason for refund:

- Close escrow account
- Transfer escrow fees from account # _____ to account# _____
- Other _____

Office Use Only

Approved by _____ Date _____

- Refund Approved for \$ _____
- Refund Denied /comments _____