



REQUEST TO CANCEL PERMIT OR PLAN CHECK

APPLICANT INFORMATION	
Property Address:	Job No.:
Scope of Work:	Date of Request:
Contact Person:	Phone No:
Email Address:	

As the permit holder for the above project, cancellation of this permit or plan check is being requested. I acknowledge that issued permits are eligible for refund only if no inspections have been performed and the permit has not expired; plan checks are eligible for refund if the application is withdrawn prior to any plan check activity. All refunds are subject to a 20% administrative fee.

Please forward any applicable refund as follows:

Payable to (Company Name or Owner Name if Owner/Builder):

Mailing Address (Street):

City:

State:

Zip Code:

REASON FOR CANCELLATION

Print Name of Requestor:

Signature of Requestor:

NOTE TO REQUESTOR:

- Please return the Building Permit Card and include a copy of payment receipt(s).
- Mail or hand-deliver to the following address:
City of Elk Grove
Development Services
Building Safety & Inspection
8401 Laguna Palms Way
Elk Grove, CA 95758
- Allow between two to four weeks for a refund.