DAMAGE DEPOSIT REFUND APPLICATION

Morinville
PLANNING & ECONOMIC DEVELOPMENT

10125 – 100 Avenue
Morinville, AB T8R 1L6
T 780.939.4361
F 780.939.5633
www.morinville.ca

SUBMIT to Development Officer

Date Received Stamp

NOTE:

- Please review the "Builder's Checklist" for completion below prior to submitting your refund application.
- Once your application for refund has been reviewed, this form will be returned to you with the "Response to Applicant" area completed with your refund status.

Personal information is collected for the purpose of evaluating the application, land-development, servicing and addressing. Collection is authorized under section 4(c) of the Protection of Privacy Act and wil be protected, used and disclosed in accordance with Section 10, 12, and 13 of the Act. The information collected may be circulated to relevant agencies and adjacent landowners in accordance section 13(1)(b)(e) and 14. If you have any questions, please contact an Advisor at the Information Management unit at 780-939-4361 or email records@morinville.ca.

PROPERTY INFORMATION

Project Address/Location: _____ File #: _____

Legal Address: Lot _____ Block _____ Plan _____; *or,* Qtr _____ Sec _____ Twp _____ Range 25 West of 4th Meridian

APPLICANT INFORMATION (Required to Issue Refund)

Company: _____ Phone: _____

Address: _____ Postal Code: _____
(STREET) (MUNICIPALITY) (PROV)

Email: _____ Fax: _____

Contact Person/Agent: _____ Contact Phone (*Cell*): _____

BUILDERS CHECKLIST (Review for completion prior to requesting refund)

☐ Lot grading review is complete with no deficiencies that require a re-submission.

☐ Curb, gutter and sidewalk are visible for Morinville Public Works to inspect.

☐ Water valve (c.c.) is operational.

ADMINISTRATION USE ONLY

Date: _____ Damage Deposit Amount $_____ Refund Granted: ☐ Yes ☐ No

Approved By: _____ Signature: _____

RESPONSE TO APPLICANT:

☐ Your refund request has been forwarded to Accounts Payable; your refund check will follow in the mail.

☐ There are outstanding deficiencies on your file that must be addressed prior to refund being granted:

_____

_____

_____

_____