



**City of Miami**  
BUILDING DEPARTMENT

**REQUEST FOR REFUND**

**PERMIT SECTION**

**PERMIT OR FINANCIAL TRANSACTION INFORMATION:**

Permit Number/Financial Transaction ID: \_\_\_\_\_

Job Address/File Search Address: \_\_\_\_\_

Reason for refund: \_\_\_\_\_

\_\_\_\_\_

**CHECK TO BE MAILED TO:**

Name of Company/Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

Name of Company/Owner: \_\_\_\_\_

Tax ID (if Company): \_\_\_\_\_

Last four digits of Social Security # (if Owner): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**ITEMS NEEDED TO PROCESS REFUND**

- Copy of permit or financial transaction
- Copy of front and back of check
- Copy of credit card statement (please erase account number)
- Tax ID of Company
- Last four digits of Social Security # (if Owner)
- Address of Company or Owner

**NOTE:**

You may bring the form in person, mail or fax.

If you are requesting cancellation or revocation please submit the form with your refund package.

City of Miami, Building Department  
4<sup>th</sup> Floor, 444 SW 2nd Ave, Miami, FL 33130  
Fax: (305) 416-2158