



Public Health - Dayton & Montgomery County

Reibold Building, 117 South Main Street, Dayton, OH 45422-1280
(937) 225-5700 • www.phdmc.org



REQUEST FOR REFUND

Date

Plumbing Company/Homeowner

Address

City, State, Zip Code

Dear Mr. Cooper:

I would like to request a refund for plumbing Permit # _____.

The job is located at _____

and was purchased on _____ for the sum of \$_____.

(Please mark one of the following):

- Permit secured in error
- Not Montgomery County jurisdiction
- Duplicate
- Other _____.

Sincerely,

Name