

REQUEST FOR REFUND DEVELOPMENT SECURITY

Please e-mail completed form to planning@olds.ca

Refund For: ☐ Development Permit ☐ Utility Excavation Permit

Permit #	Receipt #	Address of Development or Utility Excavation
Type of Development		
Refund Payable to:		Phone
Address		Postal Code
E-mail		

Check the boxes of the items that are completed. **All items must be completed to the satisfaction of the Development Officer to receive refund of Development Security.** An inspection will be conducted by the Development Officer.

In the boxes below, checkmark the items that apply to your permit.

CHECKLIST for DEVELOPMENT PERMIT Development Security Refund:

- ☐ Final Building Inspection. If there are items to be corrected or completed on the Building Inspection Report, you will be required to complete the items & return the signed form to the Town Office.
- ☐ Hard Surface Driveway and Parking Pads (if applicable) _____
- ☐ Approved Driveway Width (if applicable) _____
- ☐ Landscape Elevations (minimum 2% grade) – Building Grade Certificate returned if applicable _____
- ☐ Front Landscaping (and side on corner lots) ☐ One (1) Tree (if applicable) _____
- ☐ Front & Rear House Numbers _____
- ☐ Eavestrough & Downspouts _____
- ☐ Exterior Building Finish _____
- ☐ Curb Stop (acceptably installed and fully operational) _____
- ☐ Boulevard, sidewalk gutter and water curb stops have not been damaged (as per the pre-inspection) _____
- ☐ Other requirements as applicable for the Development Permit _____

CHECKLIST for UTILITY EXCAVATION PERMIT Development Security Refund:

- ☐ Date of Inspection by Operational Services for connection: _____
- ☐ Date of Paving: _____
- ☐ Date of Inspection by Operational Services for sidewalk, curb, etc.: _____

NAME (Please Print) _____

SIGNATURE _____

Date _____

Return the completed form to Planning & Development.

OFFICE USE ONLY	Refund \$ _____
Approved By _____	Development Security 4-0000-471-00
Date _____	Utility Ex Security 4-0000-474-00
	Chq # _____ Date _____

The personal information on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used in order to process this form. Please forward questions or concerns to the FOIP Coordinator at 4512 46 Street, Olds, AB T4H 1R5. Phone 403-556-6981, Fax 403-556-6537, or email FOIP@olds.ca