



# Marion County

OREGON

PUBLIC WORKS  
Building Inspection Division

## REQUEST TO CANCEL A PERMIT OR APPLICATION REQUEST REFUND

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING  
ADDRESS:

\_\_\_\_\_  
(ADDRESS)

\_\_\_\_\_  
(CITY & ZIP CODE)

PROJECT ADDRESS:

\_\_\_\_\_  
(ADDRESS)

\_\_\_\_\_  
(CITY & ZIP CODE)

ACTIVITY NUMBER(S) \_\_\_\_\_

REASON: \_\_\_\_\_

I would like to cancel the above permit(s) and/or application(s) and if entitled, I request a refund.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**THERE IS A \$25.00 CHARGE FOR ALL REFUND/CANCELLATIONS  
ALLOW UP TO 4 WEEKS TO PROCESS REFUNDS.**

Email to: [building@co.marion.or.us](mailto:building@co.marion.or.us)

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REV 03/2016

**MARION COUNTY**

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