

**ACC CONSTRUCTION DEPOSIT
REFUND REQUISITION**

DATE: _____

NAME: _____

DIVISION: _____ **LOT:** _____ **PHONE:** _____

PHYSICAL ADDRESS: _____

TYPE PROJECT: _____

AMOUNT OF REFUND: _____

REQUESTED BY: _____

MAILING ADDRESS: _____

(To Be Completed by BBVCC Office)

APPROVED BY: _____

DATE: _____

- 1) Please detach this form prior to submission of the ACC Project Request.
- 2) Upon completion of your ACC Project, return this COMPLETED form to the BBVCC Office.
- 3) Once your Project has been inspected, your refund check will be mailed to you.
- 4) Please allow 2 to 3 weeks before delivery of your check.