

Request for Refund

Date: 2/23/15

Send to: Accounting Office (Amount \$500.00 or less)
 Board of Commissioners (Amount more than \$500.01)

Name of Person to Receive Refund: Roy Vineyard LLC
Mailing Address (Street) 8351 NE Worden Hill Rd
Mailing Address (City, State, Zip) Dundee, OR 97115

Applicant's name (if different) Marc-Andre Roy

Permit, Docket, or File Number: SDR-03-15 TL#(s) 3326-1100

Total Amount of Refund: 998.-

Accounts/Amount of checks to be issued:

Fee \$ <u>998.00</u>	Acct# <u>10.20345.06P46</u>	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____

Reason for Request:

- Letter Attached
- Additional Explanation: _____

Department Recommendation: Ready refund \$998.00 per the attached letter withdrawing the SDR application. MJB

[Signature]
Michael Brandt, Planning Director

3-5-15
Date

FOR PLANNING OFFICE USE:

Type of permit Application: SDR

Original Receipt # 93908 Total Fees Paid: 998.00

Fee \$ <u>998.-</u>	Acct# <u>10.20345.05P46</u>	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____
Fee \$ _____	Acct# _____	Fee \$ _____	Acct# _____

Date approved: 3.19.15
Board Order(if applicable) 15-79

Date of Warrant: _____
Warrant #: _____
Amount of Warrant: _____