

Application for Refund Form

To : Registration Unit
Buildings Department
Buildings Department Headquarters
North Tower, West Kowloon Government Offices
11 Hoi Ting Road, Yau Ma Tei
Kowloon
Hong Kong

1. I (Name) _____ (Our reference no.) _____ / _____ ,
now request a refund of \$ _____ regarding *fee paid / excessive fee paid /
duplicated fee paid on (date) _____ for *registration / application.

2. To be filled in by contractor (company) applicant only:

I am the *representative / Authorized Signatory / Technical Director of
(Company name) _____ .

3. Attached herewith The original payment receipt
 Loss of official receipt statement

Signature :

with Company chop (if applicable)

Date :

* Delete as appropriate

Please tick at the appropriate box