

## SWALE DEPOSIT REFUND REQUEST

Please complete the questions below, sign, and return the form to the address above, to request your SWALE refund. Please note, the Environmental Control Committee Guidelines state that a period of 90 days after inspection should pass before the deposit may be returned. This is required in order to allow for drainage performance under wet conditions to be determined.

I hereby request the refund of my SWALE deposit for the following lot(s) in the Beau Chene Community.

LOT # (s) \_\_\_\_\_

NAME \_\_\_\_\_

STREET ADDRESS OF LOT \_\_\_\_\_

PLEASE MAIL MY REFUND TO \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(REQUIRED FOR SWALE REFUND)

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### **FOR OFFICE USE ONLY**

Date Request Received \_\_\_\_\_

SWALE CONDITION APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

IF NOT APPROVED, REASON: \_\_\_\_\_  
\_\_\_\_\_

VERIFY PAYMENT OF DEPOSIT BY \_\_\_\_\_ DATE \_\_\_\_\_

AMOUNT OF DEPOSIT \_\_\_\_\_

BCHOA A/R STATUS \_\_\_\_\_ DATE \_\_\_\_\_

FINAL APPROVAL  
\_\_\_\_\_

Ck. Issue Date: \_\_\_\_\_

Ck. # \_\_\_\_\_