

## LICENSE FEE REFUND REQUEST

## **Submit To:**

Electrical Examining Board
DIAL – Building & Construction Department
6200 Park Avenue, Suite 100
Des Moines, IA 50321-1371
Questions: 515-725-6147

Email to: elecinfo@dia.iowa.gov

Instructions: Original form must be submitted to the above address to receive a refund by check. Our finance office will only process a request with an original signature and social security number/Federal ID number of whom the refund is being issued to. Payments made by credit card, debit card or electronic check will be credited back to card or account used for purchase.

Applicant's Name and License Number (ELXXXXXX)	Printed Name of Person Making Refund Request:
Phone Number:	Signature of Person Making Request: Required
Street Address:	Social Security Number/Federal ID #: Only Required if Paid by Check
City, State, Zip:	Check Number & Date of Check: Required if Paid by Check
Reason for Refund Request:  Overpaid License Fee  Other – Please explain:	Credit Card Confirmation Number: Required if paid by credit card
State Official Authorizing Refund & Date (Official Use Only)	Date Processed Initials of Processor (Official Use Only)