



City of Whittier  
Community Development Department  
13230 Penn St. Whittier, CA 90602  
562-567-9320

REBATE REQUEST FORM - COVID-19 Relief  
25% Building Permit Rebate – Local Purchase or Services

APPLICANT NAME (Print): \_\_\_\_\_

OWNER'S NAME(Print): \_\_\_\_\_

BUILDING PERMIT NUMBER: \_\_\_\_\_

PERMIT ADDRESS: \_\_\_\_\_

BUSINESS MAILING ADDRESS: \_\_\_\_\_  
(If different from the permit address)

The undersigned hereby claims 25% rebate from the City of Whittier's building permit fee and certifies that he or she:

1. Has completed the project using a combination of products, materials and/or services procured from establishments located within the City of Whittier that are equal in value to 50% or more of the project valuation, as determined by the City, for which the permit(s) have been issued.
2. Has attached copies of receipts for supplies, materials, and services substantiating the value claimed.

Beginning July 1, 2020 through June 30, 2021.

Qualified 25% rebate of building permit fees.

- The rebate is calculated strictly on the City of Whittier's permit fee which is based on the established valuation, and does not include any ancillary fees\*
- The Rebate Program is for small local businesses (25 employees or less) and homeowners within the city.
- Must be submitted within 90 days of permit finalization.

ARE YOU THE PROPERTY OWNER?       YES       NO

I understand that the rebate funds, if any, will be returned to the project applicant unless otherwise specified on this form.

(Check box if authorized to return funds to the "Applicant")     

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Daytime Phone Number

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name legibly

\_\_\_\_\_  
Contractor's License Number (if agent)

\_\_\_\_\_  
Daytime Phone Number

\*Ancillary fees that are not be included in the rebate:

- a. General Plan Update
- b. State Green Building
- c. Strong Motion Tax
- d. Technology

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**COMMUNITY DEVELOPMENT – OFFICE USE ONLY:**

Date request received by City staff: \_\_\_\_\_ City Staff Initials: \_\_\_\_\_

Building Permit Finalization (sign-off date): \_\_\_\_\_

**ACCOUNTS PAYABLE - OFFICE USE ONLY:**

Payee (if different from above): \_\_\_\_\_

Remittance Address: \_\_\_\_\_  
(if different from above)

Budget Code: 100-18-141-000

Account Number: 342001

Description: Rebate – (s/ be Last Name) \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Date: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

Approved By: \_\_\_\_\_