



Avon Stormwater Utility Refund Request Form

Please fill out the form completely. All statements and receipts should be attached to the form and emailed to bporter@avongov.org

Dates of Billing 10/01/2021 – 12/01/2021

Name on Bill Dane Rodgers

Account No. 16558

Phone _____

Email _____

Send Check to (Name) Dane Rodgers

Address Line 1 3991 E County Road 200 S

Address Line 2 _____

City/State/Zip Danville, IN 46122

Brief Description of Issue

Moved from residence located at 7841 Tamarack Place, Avon, IN 46123

Amount to Refund \$18.00

Approved By _____

Clerk-Treasurer Use Only

Check Number _____ Amount _____ Date _____

Appropriation _____