



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 09/01/2021 - 12/31/2021

Name on Bill Anita Brubaker

Account No. 13534

Phone _____

Email _____

Send Check to (Name) Abstract & Title Guaranty Co., Inc.

Address Line 1 71 W. Main St

Address Line 2 PO Box 207

City/State/Zip Danville, IN 46122

Brief Description of Issue

Closed on home in April, prepaid quarter

Amount to Refund \$18.00

Approved By _____

Clerk-Treasurer Use Only

Check Number _____ Amount _____ Date _____

Appropriation _____