



2515 Highlands Rd - Punta Gorda, FL 33983 - Phone (941) 625-2288 - Fax (941) 625-9584

### Request for Penalty Fee Reimbursement

**Effective June 22, 2018 Penalty Fees, as a result of Late Payment or Shut-off for Non-Payment, will no longer be waived by staff. If an Account Holder is persistent in asking that a fee be waived they can speak with the Superintendent. If the Account Holder still persists that the fee be waived, they must first pay the fee, then request a reimbursement of the fee by appearing in person at a regularly scheduled monthly Board of Directors meeting and stating the reason for reimbursement.**

In order to request a Penalty Fee Reimbursement, that was as a result of Late Payment or Shut Off for Non-Payment, the account holder must:

1. Complete this form.
2. Attend a Board of Directors meeting in person to state the reason for the reimbursement (Meetings are held on the second Tuesday of every month at 4:00 pm at the CHWA office).
3. This form must be received by CHWA within sixty days of the date the fee was paid.

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

Account Number: \_\_\_\_\_

Account Holder Name: \_\_\_\_\_

Service Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

I hereby request a Reimbursement for Penalty Fees in the amount of \_\_\_\_\_ paid as a result of:

\_\_\_\_\_ Late Payment

\_\_\_\_\_ Shut Off for Non-payment

I plan to attend the Board of Directors meeting on \_\_\_\_\_ to request a reimbursement and to state the reason I should be reimbursed.

\_\_\_\_\_  
**Account Holder Signature**

\_\_\_\_\_  
**Date**

**Office Use Only:**

Fee Payment Verified by (staff name): \_\_\_\_\_

Date Penalty Fee was paid: \_\_\_\_\_

Method of payment: \_\_\_\_\_

Amount of Fee paid: \_\_\_\_\_

Board Decision to Refund the Fee:      YES              NO

If YES: Date Refund Issued \_\_\_\_\_ Check Number \_\_\_\_\_