

LAND RESOURCE PROTECTION REFUND FORM

Mail To:

Division of Land Resource Protection

501 E. State Street

PO Box 420

Mail Code 501-02A,

Trenton, NJ 08625-0420

Attn: Renee Wair or renee.wair@dep.nj.gov

Please send a copy of the check along with any support documentation with this form. Thank you.

Name and Address of Refund Recipient:	
Check Number	Last 4 digit of Credit Card #
Check date or payment date:	
Application Number	Service ID#:
Refund Amount:	
Reason for Refund:	
Phone Number:	
Email address:	
Date:	
Applicant Signature	

OFFICE USE ONLY

Received Date:	
Check Amount:	
Engineer:	
VCL /Bill ID#	
Activity #	
Authorization:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Signature:	Date: