



Eric Garcetti, Mayor
Rushmore D. Cervantes, General Manager

HCIDLA REFUND REQUEST REQUIREMENTS:

Date: _____

REFERENCE NO: _____

CLAIM AMOUNT (\$): _____

(Assessor's Parcel No. (APN) Or Property Address)

All Refund Request applications are subject to approval by respective program groups according to the nature of refunds before forwarded to Accounting for refund payment processing. Failure to provide the following documentation and information may delay processing of your refund:

- a. Fill out the CLAIM FOR REFUND APPLICATION form completely. All CLAIM FOR REFUND APPLICATION form must be signed before these are considered for processing.
- b. Identify refund from program groups (with check box): a. Rent and Code / b. Land Use
- c. Submit PROOF OF PAYMENT documents as follows:
 - a. CHECK PAYMENTS: Submit a copy (front and back) of the cancelled (cleared) check
The cancelled check image must be obtained from your bank.
 - b. CREDIT CARD PAYMENTS: Submit a copy of credit card statement with claimed amount indicated.
 - c. ONLINE PAYMENTS ON HCIDLA WEBSITE: Submit documents with payment confirmation number
 - d. HCIDLA PUBLIC COUNTER PAYMENTS: Submit a copy of public counter payment receipts.
- d. Submit or mail the above refund requirements to:
 - a. For Land Use refunds:
Land Use, HCID P.O. BOX 532729, Los Angeles, CA 90053-2729
 - b. For Rent and Code Refunds:
Rent and Code HCID, P. O. BOX 17280, Los Angeles, CA 90017
- e. For SENIOR APPEALS REFUND: Submit the Code Determination letter and Senior Inspector Appeal Form, along with completed Claim for Refund Application (a /b); with proof of payment requirements (c) to Rent and Code address.
- f. Online refund application should be completed at respective customers portal for:
 - 1) Rent and Code
 - 2) Land Use

Note: In accordance with the HCID policy and reference to LA Admin Code Chapter 10, Article 1, Sec 5.170, claims for refunds must be submitted within twelve (12) months from the date of payment. This time limitation is applicable regardless of whether there are pending requests for: penalty fee waiver, exemption claim, or senior inspector appeals, RSO determination, unit count review or other items. Please keep a copy for your records.



ERIC GARCETTI, MAYOR
RUSHMORE D. CERVANTES, GENERAL MANAGER

RENT & CODE
P.O. BOX 17280, LOS ANGELES, CA 90017
Tel Nos. 213 744 7377
hcidla.bimsaccounting@lacity.org

Land Use
P.O. BOX 532729 , LOS ANGELES, CA 90053-2729
Tel. Nos. 213 808 8846
hcidla.landuse@lacity.org

CLAIM FOR REFUND APPLICATION

APN #:

Name of Payee:			
First	Middle	Last	
Check will be made payable to NAME provided.			
Mailing Address:		City	State
			Zip Code
Phone Number:	Email Address:		
Property Address:		City	State
			Zip Code
Date Paid:	Amount Paid (\$):	Amount Claimed (\$):	

Explain the details of the events leading to the filing of this claim, and attach required supporting documentation. If more space is needed, please attach additional page.

I hereby certify that the above statements are true and correct:		
	Signature and Title of Payee	Date

All claims for refund must be filed with HCIDLA within one year of the payment date. Claims without proof of payment will be rejected. Valid proof of payment includes the front and back image of the cancelled (cleared) check, a credit card statement with claimed amount indicated, online payment confirmation number from HCIDLA website, or a HCIDLA public counter receipt.

For Departmental Use:

DENIED: _____	No proof of payment	With Outstanding invoices	No credit available	Worklog: _____
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Remarks:
