



Reimbursement Agreement

County of Ventura • Public Works Agency, County Surveyor's Office
800 S. Victoria Ave, Ventura, CA 93009-1670 (805) 654-2067

CERTIFICATE OF CORRECTION

NO.: _____

I, _____, the undersigned, hereby authorize the County of Ventura to process the above-referenced request in accordance with the Ventura County Surveyor Division Fee Schedule. I am depositing \$_____ to cover costs based on real time expended.

I understand and agree to the following:

- that if the final cost is less than the deposit fee, the unused portion of the deposit will be refunded to me.
- that if the final cost is more than the deposit fee, I shall pay the full processing cost.
- that nonpayment of additionally billed charges may result in retention by the County of the requested information and that charges are due and payable within 30 days of billing.
- that invoices unpaid after thirty (30) days will incur a 2% interest charge compounded monthly.
- that all County of Ventura Surveyor's Office staff time spent processing my request will be billed against the deposit fee. This includes, but is not limited to, staff time spent: researching deeds, subdivision laws, and other records and preparing reports of the results.

NAME OF PRINCIPAL OR APPLICANT: _____

DRIVER'S LICENSE NO.: _____

NAME OF COMPANY: _____

If a Corporation, please list Corporate Officers authorized to act on behalf of the Corporation (use additional sheets, if necessary): _____

MAILING ADDRESS OF COMPANY OR APPLICANT: _____

ZIP CODE: _____

SIGNATURE: _____ **DATE:** _____

ATTENTION: Whoever signs as principal or applicant will be held responsible for all charges.