

REQUEST FOR BUILDING PERMIT EXTENSION

This form is to be completed by the property owner, authorized agent or licensed contractor. Approval of additional time is at the discretion of the Chief Building Official. Completion of this form does not automatically grant an extension. **Please write legibly**. Additional fees may apply:

Requestor Name:					
Contact Number:					
Jobsite Address:					
Reason(s) for reque	st of extension	n (Please be det	etailed):		
Signature			Date		
		For Offi	ïce Use Only:		
Received by:			Received Stamp		
Extension Granted:	□ Yes	□ No			
New Permit Expiration D)ate:				
CBO Signature:					
Requestor Informed of D	ecision on:				