



Building Division Request for Permit Extension

Permit # B	Permit issued date:
Job Address:	Project description:
Date and type of last documented inspection:	Project expiration date:
Applicants Name:	Owners name:
Applicants Phone:	Applicants Email:

(Please attach a copy of the signed Job Card)

Reason for Extension Request:

Proposed completion date:

Applicants Signature: _____

Date: _____

This section for Building Division use only:

In order to ensure a timely completion of this project the following conditions and progress benchmarks must be met in order to maintain a valid extension of this permit:

Extension Approved to: _____
(New Expiration Date)

Extension Denied

Signed: _____ Date: _____
Elton Brooks, Building Inspection Supervisor