



Land Use Services Department

Building & Safety Division

Extension Request Form for Building Applications and Permits

Project Address: _____ Permit Number: _____

Applicant's Name/Company: _____

Address: _____ City: _____ State: _____

Email: _____ Phone: _____

Building Permit Application: Plan Review applications are valid for 180 days from the date of the application. Within this timeframe you may obtain a building permit or, if you run out of time, you may submit a written request for an extension. The request must explain the reason preventing the building permit from being obtained. If the permit has not been obtained or an extension requested within 180 days from the date of the application, the plan review may expire. If approved, residential permit applications may be extended 180 days and commercial permit applications may be extended 90 days.

Building Permits: Issued building permits are valid if the building or work authorized by a permit is started within 360 days from the date of permit issuance or, if after the work has started, the building or work authorized by the permit is not suspended or abandoned for a period in excess of 180 days. If you run out of time, you may submit a written request for an extension to avoid the permit from expiring. The request must explain the reason preventing action from being taken.

The timeframe for review of building application and permit extension requests is five business days.

Please check one of the following:

I am requesting an extension for my building permit plan review application.

I am requesting an extension for my building permit.

Reason for Extension Request:

Is there an active code enforcement violation case on this site: Yes No

Signature: _____ Date: _____

Print Name: _____ Check One: Property Owner Permit Holder
Other _____

----- **Official Use Only** -----

Date Request Received: _____ Permit Number: _____

Extension: *Granted/Length of Extension* _____ *Not Granted/Comment* _____

Previous Expiration Date: _____ New Expiration Date: _____

Name: _____ Title: _____

Signature: _____ Date: _____